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THE BLUE QUILLS DIPLOMA NURSING PILOT PROJECT: A CASE STUDY IN INTERCULTURAL PROGRAM IMPLEMENTATION

by

MARJORY EMELY ANNE DAVISON

A THESIS

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Date 20 December 1984
.....

DEDICATION

To Wayne, Kim and Cindy

for their love, patience and support

ABSTRACT

The purpose of this exploratory study was to describe and analyze the development and implementation of the Blue Quills Diploma Nursing Pilot Project, a joint venture of the Blue Quills Native Education Council and Grant MacEwan Community College which was implemented in the years 1980-83. A secondary purpose was addressed in order to accomplish the primary purpose: to develop an analytical framework from the related literature.

The case study format was chosen as it allowed freedom to search widely for data that could be used to describe and subsequently analyze the Nursing Education Project. Data were gathered by document analysis and interview techniques. All of the fourteen nursing students were interviewed at the end of the period at the Blue Quills Native Education Centre before transferring to the Edmonton campus of Grant MacEwan Community College. Eighteen other persons associated with the project were also interviewed. The data collected from interviews were augmented by information selected from relevant written documents.

Major findings of the study were that unique organizational arrangements are effective in recruiting Native nursing students. The decentralization of post-secondary programs coupled with an open admissions policy made the program more accessible in both a geographical and an academic sense.

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CHAPTER I

INTRODUCTION TO THE STUDY

I. Introduction

The education system has failed Native North Americans. Dropout rates have been as high as 94 percent from primary and secondary schools (Hawthorne, 1966) and the figures range from a low of 79 percent to a high of 93 percent from institutions of higher learning (McDonald, 1978:73).

In the 1970's, the American Indian people became involved in the reform and direction of their own educational systems (Havighurst, 1981:239). Although this involvement, mainly affected the primary and secondary school systems, it was to have its effect on post-secondary institutions as well.

In Canada, in 1972 the National Indian Brotherhood position paper on Indian Control of Indian Education, outlined the need for local control of educational financing and decision-making by Indian bands and the need for Native teachers. The federal government, through its Department of Indian Affairs and Northern Development accepted the proposals for change in 1973.

The immediate demand for Native teachers made it necessary for educational institutions and Indian people to consider unique arrangements whereby Indian people who were

very underrepresented in the post-secondary education system would have access to teacher education.

The main common issues of a British Columbia Native Education Program which arose were community involvement, incorporation of native language and culture, decentralization, entrance requirements and paraprofessional training and program quality (Wyatt, 1977:12).

One of the newly established Native teacher education programs was Project Morningstar at Blue Quills Native Education Centre near St.Paul, Alberta. The Centre had been a school operated by the federal Department of Indian Affairs and was taken over by an Indian Council with representatives from seven local reserves. In the first four years of the Morningstar program, 37 students successfully completed the requirements for teacher certification. Prior to 1975, there had been only 12 Native university graduates from Alberta universities (Sloan, 1981:3).

Realizing that there were the same existing inequities in the educational system which were preventing Native people from becoming nurses as well as teachers, the Blue Quills Native Education Council set out to improve the situation.

According to statistics, the number of Indian students enrolled in university was increasing steadily, although only at one-half the rate of the national average. The number of Native students enrolled in nursing, however, had declined drastically between 1976 and 1978, from 88 to 30 nationally (Indian Affairs, 1980:54). According to Wong and Wong

(1979:83), "underrepresentation of minority groups in schools of nursing is not an unusual problem." The findings of their study on minority groups in nursing supported the findings of other research done in the United States. Wong and Wong found that ethnic minorities were underrepresented and that their academic survival rate was low when compared with the majority population (1979:83).

More Native nurses are needed to help plan and provide appropriate health care services for their own people. As Native people knowledgeable in the health care delivery field, they would then be in a position to work with Native groups in making informed decisions in health care planning as it affects Native people and other developments in their communities. This would be in keeping with the recommendation of the Booz, Allen, Hamilton Report (1969) for the improvement of Indian Health Services:

> to support and actively work for a comprehensive and coordinated program of Indian development, which recognizes the interrelated nature of social, economic, education and health problems.

The Blue Quills Native Education Council recognized the need for action if Native people were to become professional nurses. The result was the Blue Quills Nursing Diploma Project.

This unique nursing project was initiated in October 1980, to provide an opportunity for Indian people to commence their nursing studies while remaining in familiar surroundings. Personnel from the Blue Quills Native

Education Centre and Grant MacEwan Community College in Edmonton had been involved in the planning since 1975.

The determination of the Blue Quills Native Education Council finally paid off with the implementation of the Nursing Project in October 1980.

II. Purpose of the Study

The primary purpose of this study is to describe and analyze the development and implementation of the Blue Quills Nursing Education Project.

A secondary purpose is addressed in order to accomplish the primary purpose: this is, to develop an analytical framework for this study based on the relevant literature.

III. Significance of the Study

This is the first Canadian nursing education program for Native nurses with local involvement at the administrative level. It is conceivable that such programs will be sponsored throughout Canada as Indian people increasingly assume more responsibility and accountability for their own health care services. This study will be of interest in the development of future programs. It will also be of use to the following groups:

1. Those Indian groups interested in controlling and operating their own health care delivery systems;
2. Staff members in health agencies who are concerned with supplying nursing service to Indian people;

3. Federal and provincial government bodies which are encouraging Indian participation in the administration of health programs;

4. Nurse educators who are concerned about maintaining program quality in nursing education;

5. Educational administrators who are involved in the organization and administration of educational programs.

6. Indian leaders, especially in Alberta, and possibly across Canada.

IV. Assumptions

It was assumed that the reported information provided in interviews regarding the project was accurate and complete, even though the interviews were carried out nineteen months after the initiation of the project.

V. Delimitations

The study is delimited in the following ways:

1. The survey is restricted to a single program in nursing education in northeastern Alberta.

2. The study deals with the Project only for the period that it took place at the Blue Quills Native Education Centre and the transfer of the students to the urban campus i.e., all of Phase I of the Project and four months of Phase II.

VI. Limitations

1. The findings of this study should be applied only to the population being studied, nursing students in a nursing education project at one Indian controlled institution in northeastern Alberta.
2. There were key people who were not interviewed as they were no longer involved with Blue Quills and could not be reached.
3. The fact that the researcher is a non-Native imposes limitations in the area of intercultural communication.

VII. Definition of Terms

Important terms and their definitions are listed below. Definition of other terms are provided as they appear in the study.

Indian and Native: Used interchangeably to denote people of North American Indian ancestry.

Status Indian: An Indian person who is registered with the Department of Indian Affairs under the conditions of the Indian Act.

Post-secondary and higher education are used interchangeably to mean the pursuit of formal education following secondary education.

VIII. Organization of the Thesis

The problem, its significance, the assumptions, delimitations and limitations pertaining to the study, and

definitions of key terms have been presented in this chapter. The remainder of the thesis is organized in the following manner:

1. A review of the related literature is presented in Chapter II which is divided into sections on minorities in post-secondary education, minorities in nursing education and Native Indians in post-secondary education. Lastly, a review of the literature reveals special organizational arrangements which have been used in Native teacher education programs. The analytical framework for the study is derived from this literature review.

2. The research methodology is presented in Chapter III in four sections. In the first section, the case study method and its relevance to this study is discussed. The methods used to collect the data follow in the next section. In the third section, the sources of data are outlined. Chapter III concludes with the procedures used for analysis of the data.

3. Chapter IV is an overview of the history of the development of the Blue Quills Nursing project. The historical background is presented in two parts: (1) From the establishment of the Blue Quills school in 1931 to the Indian takeover in 1970; (2) From the takeover in 1970 to the beginning of the nursing program in 1980.

4. Chapter IV contains a description of the project as it was developed and implemented.

5. An analysis of the issues of the nursing project is presented in Chapter VI using the analytical framework developed from the related literature.

6. The final chapter provides a summary of the findings as well as the conclusions, recommendations and suggestions for further research.

CHAPTER II

REVIEW OF THE RELATED LITERATURE

The review of the related literature is presented in five sections in this chapter. In order to develop an analytical framework for application to the Native nursing pilot project, it was necessary to review, in section one, the problems of minorities in post-secondary education, then in section two, to deal more specifically with minority students in nursing education, then in section three, to narrow the focus even further to Native Indians in post-secondary education. Each section uses a similar format in order that similar problems or issues facing each group can be discussed first. Any additional or different problems are presented at the end of each section.

The fourth section is a review of the literature on the organizational structure of some Native post-secondary programs which have been developed to address the problems and issues discussed in the first part of this chapter.

In the fifth section, the analytical framework which is derived from the related literature is discussed and summarized in table format.

I. Minority Students in Higher Education

Most of the available literature concerning the problems facing minority students in higher education originates from

the United States. Due to the affirmative action policies to foster equal opportunities, much has been learned in the process. The problems affecting minority students in higher education are numerous and wide ranging, but ultimately

> it is the disadvantaged economic status of most minority groups which has historically tended to alienate minorities from activities and processes occurring in the society at large. (The Office for Minority and Special Student Affairs [OMSSA] 1979:4)

Lack of Academic Preparation

The major barrier to higher education is the poor academic preparation of minority students (Crossland, 1971:62; OMSSA, 1979:31; McDonald, 1978:74; Baldwin et al., 1980:19).

These studies have shown that minority students have deficient precollegiate preparation, particularly in mathematics, physical sciences and English as well as inadequate and unsatisfactory academic advising. Faculty/student relations are also unsatisfactory due in part to unfamiliarity with and/or insensitivity to minority students. There is also a lack of adequate tutoring and mentors are in short supply (OMSSA 1979:31). Aiken (NLN 23-1688) reinforces this view by saying that the strong endorsement to recruit students, coupled with the lack of follow-up support, places survival solely with the students. All too often minority students soon learn that "they are not wanted nor are they expected to achieve stated goals." She states that deficiencies are not corrected in "remedial

programs", basic skills development or "special tutorial" because:

1. The time allotted is insufficient for the experience needed;

2. The facilitators lack real commitment and interest in the growth and development of the students;

3. Needs of the students fail to be assured appropriately;

4. There is minimal reinforcement in content areas since the reading assignments may be separated from other course work.

There is a tendency for teachers to blame the students for not using facilities and students blame the system. "The student becomes a victim of the system" (Aiken, NLN 23-1688).

A University of Wisconsin 1974 Task Force on Academic Support Programs for Minority and Educationally Disadvantaged Students unanimously agreed that academic support programs should be strictly academic in nature and related to the academic programs on campus. These support programs should not be subsidiaries of academic departments; instead they should be integral and independent units under the administrative office of academic affairs.

It is the contention of this Task Force that academic support programs, although important, are not the basic issue. At issue is the faculty support for reform at the freshman and sophomore levels. They state that the first two

years of higher learning must be more "humane and attractive" for minority students or they don't have a chance. "Faculty must be responsible for the quality of instruction in institutions" (cited in OMSSA p. 19).

Inadequate Student Support Services

The Office for Minority and Special Student Affairs has stated that:

> since academic concerns are a major element in student's problems, it is essential that minority support services units become more aware and integrated into academic life. (OMSSA, p. 33)

Student support services are those services which support the teaching-learning process. They are: personal counselling and program advising, financial assistance, tutoring, housing and transportation (McIntosh 1979:25). Also essential but mentioned less frequently in the literature is the need for day care facilities (Gilmour 1974: 10 and McIntosh 1979:24).

1. Personal Counselling and Program Advising

Although personal counselling and program advising have often been separate and distinct services, it is now

> essential that students' records be shared and that university units which gave subsequent contact with students be fully aware of individual students' backgrounds, needs and objectives. (OMSSA, 1979:35)

Faculty must be sensitized to minority concerns since low expectations of students may cause them to react with

suspicion and hostility, producing a stigma toward the whole institution (OMSSA, p. 6).

This report suggests that there be more incentives for faculty to advise minority and disadvantaged students. Minority-sensitive faculty would need to be identified and financial rewards given to the academic departments.

There is also a need for complete up-to-date files on each student, regular meetings of advisors and standing committees to coordinate the advisory process (OMSSA, p. 36).

2. Financial Assistance

Lack of money becomes a barrier to higher education (Crossland, 1971:53). There is a need for comprehensive programs of financial and information as part of the regular component of recruitment and admissions; these should involve minority media as well as informal information networks (Institute For the Study of Educational Policy [ISEP] 1980:41).

Due to the debts that accumulate, loan money is not an alternative that minority students choose. Therefore, if the students do not have sufficient finances they are required to work part-time. This makes it difficult to coordinate classroom work with job responsibilities and study time. As the work load increases students rely more and more on financial aid. Adequate finances are essential to attendance, let alone success at college (OMSSA, p. 31).

3. Tutoring

As with program and personal advising, it is thought that tutoring should be systematically linked. The names of tutors, their specialities and locations could be exchanged to avoid duplication and would also give a better idea of how the tutoring services are being used and where the greatest needs are (OMSSA:36). The quality of the services is dependent upon the commitment and sensitivity of the faculty as in academic and program advising.

4. Housing

Crossland states that "the great majority of American college students attend institutions close to home." As a rule, the less wealthy the student, the closer he/she stays to home. It follows, then, that distance from residence to a facility of higher education can present minority group students with a deterrent to enrollment. He called this the "distance barrier" (Crossland:67).

This, of course, has implications for housing services. If students live near home, they will commute to classes. Although few colleges are residential, research studies have found that residential living increases the likelihood that students will remain in college. When students live off campus there is little opportunity for social interaction with peers and free time. These students may "unwittingly be denying themselves social and informal reinforcement of their academic development by commuting". Since most colleges are

not in a position to build residences the suggestion is that administrators provide adequate surrogates for residential programs that would involve faculty and students (OMSSA, 1979:42).

As to the types of housing available, it is stated that "there are few systematic minority-sensitive programs within the dormitory system" (OMSSA, 1979:32). Students may find the search for housing as overwhelming as the program itself.

5. Transportation

Due to the fact that most students commute to two-year colleges, there are costs incurred for which no financial aid provisions are made (ISEP, 1980:42). This could affect the frequency of attendance and/or the retention of minority students who are underfinanced.

6. Day Care Facilities

The topic of day care facilities is not one that is discussed in a specific way in the literature. This may be because of the commuting nature of the minority students described where the children are cared for in their home community. The issue becomes one of adequate financial assistance to the student to be able to obtain suitable day care services.

II. Minority Students In Nursing Education

Minority students in nursing education face the same problems as other minority students, however some of the literature is based on nursing students and reveals special needs.

Lack of Academic Preparation

One of the major problems in recruiting the disadvantaged student is equating existing selection criteria in schools of nursing with the educational background of the student (Gilmour, 1974:6; Heins & Davis, 1972:121). Minority students are often academically deficient and are not aware of needing help until they are so far into the semester that it is too late to help (Malhiot, 1929:473). This is reinforced by Harvey (1970:48) when she says that the primary problem of the socially handicapped applicants to nursing programs is qualifying in critical areas of intellectual competence and communications skills.

Gilmour (1974:6) states that there are two alternatives to dismissing potential candidates who don't meet the required standards: 1. change admission requirements to open admissions policy, which would commit institutions to provide academic and tutorial services throughout the student's program; 2. develop remedial programs for potential nursing candidates to bring students up to a traditional level of academic acceptability for the program. The "wide admission door" policy is suggested by Harvey (1970:49). She

emphasizes the need "to retain high standards and demand ultimate mastery and adherence to the sustaining and critical standards which a viable society develops and maintains itself."

The positive aspects of open admissions is that it would require admission standards and curriculum to be more flexible and students who are subjected to the "tyranny of the tests" would not be excluded by failing to pass the standard tests (Gilmour, 1974:8,9). Gilmour goes on to say that there are drawbacks to open admissions. Firstly, the standard must be lowered to the level of the slowest student; 2. Failure would be high due to low quality secondary school preparation; 3. Standards of nursing education have often concentrated more on flexible admissions requirements than on the quality of the education program itself. If students could have individualized teaching and learning objectives instead of the current group education, Gilmour feels that open admissions could work more effectively. Services required to support these objectives would be: a reading diagnostic testing course followed by intensive reading experiences, teaching of study skills, proper textbook techniques, stable tutorial assistance and English as a Second Language. Students require concrete written examples of projects from which they can draw ideas as well as help to conceptualize and problem solve (Gilmour, 1974:10).

Most of the programs described in the nursing literature have been designed to prepare students before entry to

schools of nursing by counselling, tutoring in English, mathematics, and science courses, and offering classes in reading and writing skills.

For example, one program offered a prefreshman summer tutorial program to help raise the scholastic level of those students who had not performed well on the preadmissions tests (Frackleton & Faville, 1966:27).

The ODWIN (Opening the Doors Wider in Nursing, Inc.) program prepared the students through counselling, tutoring, giving courses in English, science and mathematics and arranging classes to develop reading and study skills. They also provided a postgraduate high school year and a transitional summer program. For those already in a nursing program, they receive tutoring, counselling and payments for summer courses (Baugh, 1972:102). ODWIN tried to find means whereby educationally disadvantaged youth could be helped to overcome their disadvantages in order to qualify for and complete a nursing program (Scheinfeldt, 1967:1464).

Another academic support program which included pre-entry tutorial services was found to influence the retention of minority students at the School of Nursing at the University of California, during a three year study (Drice et al., 1978:22).

Inadequate Student Support Services

Added to the dilemma of academic deficiencies, minority students are beset with feelings of loneliness,

isolation, frustration and disillusionment when they enter the predominantly white environment (Malhiot & Ninan, 1979:473). Students face the difficulty of being part of a white institutional profession and trying to maintain their own identity (Wong & Wong, 1982:256). Minority students almost always function under double jeopardy. Most of their problems are with them from birth and become an inescapable part of that person, often throughout their lives (Harvey, 1970:48).

Although the basic academic skills must be emphasized, there is a need for students to have opportunities for personal and social growth experiences. This would require that nursing faculties gain a better understanding of minority students in order that they can identify needs and relate to them in an appropriate manner (Wong & Wong, 1980:89 and Baugh, 1972:102). Studies show that faculty commitment to black student education was found to be the single most determining factor of success in enrolling and retaining black students in schools of nursing (Buckley, 1980:46). However, Malhiot & Ninan (1979:474) state that even when faculty are committed they are rarely proficient in handling problems. This would suggest that nursing schools would be wise to employ minority teaching personnel. Not only would they act as role models for the students, but they would play an important liaison role between the rest of the faculty and the minority students (Claerbaut, 1980:14).

Financial Assistance

The need for substantial financial support is recognized by most authors (Schrader, 1973:24; Gilmour, 1974:10; Baugh, 1972:102; Harvey, 1970:50). Minority groups are characterized by a "less than" background in vital areas (Harvey, 1970:49), not the least of these is personal finance. Aggressive efforts are required in order that financial stringency does not add an additional burden to the minority student (Claerbaut, 1980:14).

Research

Research about minorities in nursing is essential as there are still many questions to be answered and problems to be addressed (Wong & Wong, 1980:89; Claerbaut, 1980:14).

III. Native Indian Students In Post-Secondary Education

The Native Indian population, although a minority group in North America, have taken it upon themselves to become involved in determining the direction of education for their own people. It is with this emphasis that the literature on Native peoples is reviewed in order to give some insight into the issues as experienced by this group.

Lack of Academic Preparation

The literature on Native Indian education emphasizes that the nature and quality of elementary and secondary education is inadequate. The elementary and secondary education of

Indian students is "a stumbling block to successful higher education." Students from Indian institutions are not prepared to compete with university students from the middle-class backgrounds as the whole environment and attitude are alien to them (McDonald, 1978:74).

Ashley and Stewart (1974) state that one of the problems facing Indian students who seek a nursing education is "course requirements for which students have inadequate preparation." This is supported by Baldwin et al. (1980:19) who say that one reason that Indians have had limited access to health professions and occupations is because of "deficiencies in their early education."

It has been suggested that better precollegiate remedial science programs would give Indian students the background to be successful (Ashley & Stewart, 1974). McDonald (1978:75) contends that it is the responsibility of the educational system to prepare students for higher education. The object of this education would be "survival in whatever environment that child may choose." Under ideal conditions, Locke (1978:131) says elders and community leaders would help college students. College students would tutor and provide the models for secondary students. College and secondary students would assist in tutoring in primary schools. She maintains that with increased involvement there would be increased commitment. In the meantime, Indian students are faced with remedial programs in the form of precollegiate classes and/or tutorial programs.

Inadequate Student Support Services

1. Personal and Program Advising

In the literature concerning the Indian Teacher Education Program at the University of Saskatchewan, staff in the program worked as both counsellors and course instructors. Although this arrangement seemed to have merit at first, two problems arose. One was the time factor; the time that instructors spent preparing and teaching classes was time that was unavailable for counselling purposes.

The second problem was related to the expectations of counsellors and teachers. It was difficult for a counsellor to make demands of a student when in the instructor role. A recommendation in order to make the situation more workable would be to separate the roles and to have the counsellor work with the instructors (Barnett nd:19).

2. Financial Assistance

It is the view of McDonald (1978:76,77) that Native Indian students are not continuing in post-secondary institutions due to lack of personal finances. He explains that even though most Indian students qualify for Indian Affairs funds, tribal funds or scholarships, financial aid offices tend to trim the amount down to the minimum level. The student ends up with no spending money for such necessities as clothes and transportation. Financial aid counsellors suggest that most students could work part-time; however, McDonald disagrees and argues that students are

disadvantaged by their lack of adequate educational preparation and cannot be expected to carry work responsibilities as well as studying.

Whiteman (1978:106) states that the primary reason that Native American students drop out at the university level is financial rather than academic or personal. She feels that with the possibility of only limited federal financial assistance, the Indian student's situation will not improve.

Economic costs are cited by Baldwin et al. (1980:19) as limiting access to health professions. Ashley and Stewart (1974:1) say that Indian students do not consider nursing education because of "financial troubles."

The provision of adequate finances is imperative if Native students are to succeed.

3. Tutorial Services

Speaking from the experience of the Saskatchewan Indian Teacher Program, Barnett (nd:11) states that "tutorial assistance is essential in enabling students to complete a quality university teacher education program." He believes that the attrition rate and failures would be very high without this service. Wyatt (1977:12) describes a decentralized teacher education program in British Columbia where students received assistance to develop academic skills from the Faculty Associate of Simon Fraser University and individual instruction from university personnel. This was

necessary to give students with modified entrance requirements the support to maintain program quality.

4. Housing and Day Care

In the Report of the Task Force on Native Students (1978:34), the need for a housing and day care registry as well as an orientation program was identified.

The type of housing and day care available to the students is dependent upon the financial assistance available.

* * * * * *

There are five additional issues which are discussed in the literature on Indian higher education which require attention. They are the cultural content of curriculum, the field centre concept, program quality, program accessibility and relevance to Native people.

5. Cultural Content of Curriculum

There is a general agreement among writers with an interest in Native Indian education that a cultural component is essential in curriculum development.

Most Native teacher education projects have planned cultural components into their programs but there is still much discussion as to what form it should take (Sloan, 1981:8). McIntosh (1979:29,30) suggests that the cultural

content issue can best be addressed by programs which have a strong local control in order to gain the commitment of students and elders as well as easier access to cultural events.

The discussion of cultural content in curriculum is ongoing.

6. Program Accessibility

Program accessibility has been a problem for Native people. Not only do they often lack the academic requirements and finances to enter post-secondary institutions but they must leave their familiar surroundings, family and friends to enter an institution and a way of life which is alien to them (Ashley & Stewart, 1974:1).

The adaptation of entry requirements through mature-student entry clauses and advanced standing has occurred in all Native teacher education programs. This has been necessary because 95% of Native people do not complete high school. Developers of Native education programs at the post-secondary level feel that as long as program quality is maintained, "adapting entrance requirements is the only way that inequities present in education are levelled" (Wyatt, 1977:11).

The decentralization of teacher education programs makes these programs more accessible in terms of "physical and psychological adjustments as well as financial considerations" (Wyatt, 1977:9). Indian people also want

access to programs which are relevant to their needs and objectives.

The Field Centre concept is a common characteristic of Native teacher education programs in Canada which calls for universities to establish learning centres closer to the students' homes (Sloan, 1981:6). Students become geographically isolated when they attend educational institutions distant from their homes which deprive them of the cultural support from the community.

Field centres serve as a transition stage between the Native community and the university. McIntosh (1979:24) defines the functions of the field centres as: 1. maintaining the student closer to family, friends and culture; 2. developing a supportive peer group; 3. solving housing, day care, and transportation problems which could be acute for students with dependents.

The field centre allows many students to stay at home to complete a major portion of their program. As well, it allows students to be placed in local integrated schools for the practicum part of the program.

As Sloan explains, it is difficult to assess the concept of field centres as it is so interrelated with student support services (Sloan, 1981:6).

The field centre concept is a unique characteristic of Native teacher education programs which requires consideration in studying and developing other programs in Native education.

7. Program Quality

Program quality is a concern in Native education programs. In an evaluation report from The Indian Students University Program Services (ISUPS) (1974:12), it is stated that the widespread opinion of Indian people on the subject of higher education is that "the university must offer an academic program which is not one of lowered standards." Barnett (Monograph No. Four:3) supports this issue in the context of Indian teacher educator programs when he discusses equal certification. He states:

> Equal certification is a sound and justifiable argument. Indian people demand equal treatment. Not to give Native people equal certification would be to continue to treat them as second class citizens. Special certificates of any kind which limit a minority group in any manner when compared to other people in society are justifiably not acceptable.

Wyatt (1977:1) states that the question is often asked "whether program quality is sacrificed when there is community involvement, native language and culture, decentralization and entry based on paraprofessional experience" (an eight-week practicum as a teacher aide). The involvement of non-professionals in decision-making, the adaptation of entry requirements and the incorporation of Native language and culture may be seen as lowering the standard, she continues. It is not only educators who are concerned about lowered standards; the participants themselves do not want a watered down program (Wyatt, 1977:11).

Wyatt suggests that programs can differ "without loss of quality." The fact that the community is involved in planning programs, gives non-professionals the opportunity to learn new skills and to make choices and decisions concerning their education. The learning of Native language and culture is incorporated into the development of skills in literacy and curriculum planning, without jeopardizing achievement in either area (Wyatt, 1977:11).

8. Relevance to Native People

The past record of the relevance of educational systems to the Indian in North America is abyssmal. Christenson and Demmert (1978:139) write that "attempts by the federal government to educate the Indian have caused a deterioration of both his lifestyle and economic position." They go on to say that in order for Indian people to have a system which is relevant, it is important that Indian people "should wield complete authority over administration, personnel, finances, and curriculum."

Program planners who have designed Native education programs have recognized the importance of local control of educational financing and increased local authority in decision-making. As well as administrative autonomy, the need for Indian-oriented curriculum materials and Native teachers and counsellors who "have an intimate understanding of Indian ways of life" was identified in the position paper

on Indian control of Education (National Indian Brotherhood, cited in Wyatt, 1977:Vol. 2, 3).

The literature on Native Indian education in post-secondary institutions has revealed issues similar to those reported in the literature of other minority groups such as inadequate educational preparation and academic counselling, and lack of appropriate student support services. The additional issues found in the Native literature are those of cultural content in the curriculum, the field centre concept, program quality, accessibility and relevance as related to Native teacher education programs.

IV. Organizational Literature

This review of the organizational literature will deal primarily with organizational patterns which have emerged from Native teacher education programs to address unique issues faced by Native communities and the universities in developing programs to meet their special needs and objectives.

Havighurst (1981:328) has stated that:

> In this century two diverse and competing approaches have affected the education of American Indians. One is the assimilation of Indians into Anglo society. The other is the self-determination by separate Indian tribes and communities of the education of their own children, based on tribal culture and tradition. During the 1970's, Native Americans made remarkable achievements in the area of self-determination in the area of structure and content of their education system. (Havighurst, 1981:329).

In Canada in 1973, the Department of Indian Affairs endorsed the National Indian Brotherhood policy paper

Indian Control of Indian Education. This document addressed the rights of Indian people to direct the education of their children through (a) parental responsibility and (b) local control of education (Daniels, 1973:200).

This policy paper also addressed the need for Native teachers and counsellors, cultural education centres and a need to change curricula and language programs to reflect Native culture (Daniels, 1973:201).

If Native children were to be taught by Native teachers with special emphasis on culture and language, there was a need for unique teacher education programs.

Over the next decade, three organizational patterns emerged in Native teacher education programs in Canada. McIntosh (1979:26-27) outlines these patterns as follows: the University Field Centre Pattern, the Local Control Pattern and the Negotiated Service Pattern:

The University Field Centre Pattern. The main characteristics of this pattern include the following:

1. overall program management by a full-time, tenured member of the academic staff of the sponsoring university;
2. field centre management by a seconded professional, with a sound local reputation as an educator, who joins the university on a full-time but temporary basis and is responsible solely to the program manager;
3. governance through university procedures, supplemented by an advisory committee and
4. funding by way of secure provisions in the university budget.

II. The Local Control Pattern has the following main characteristics:

1. it is designed to serve the needs of the locality;
2. local management is provided by an office of the

locality (such as an employee of the Native Education Society);
3. advice and services are sought from a liaison officer on the academic staff of an affiliated university; and
4. funding is secured by the local Native education society which in turn purchases services from the affiliated university.

III. The Negotiated Services Pattern combines characteristics of the first two patterns. It assumes two equal partners--a university and a local Native education society--co-sponsoring a program:

1. responsibilities of the two partners are negotiated;
2. staff officers of the two sponsors are appointed as agents for fulfilling these responsibilities and are accountable to their particular employer for the duties assigned to each;
3. there are two systems of financial management, and
4. overall program supervision is achieved through a coordinating board made up of representatives of the two organizations. (McIntosh, 1979:26,27).

McIntosh (1979:27) explains that in practice these patterns have not so much been chosen as a result of a rational planning process but rather have been "pragmatic responses" to particular circumstances.

Havighurst (1979:24) says that when examining local community participation in educational policy making and school administration, it is necessary to distinguish between the two phenomena of administration decentralization and local community control. Administrative decentralization is the reduction in size of an administrative unit from a larger system in order to make educational operations more efficient, less bureaucratic, and more flexible. On the other hand, local community control of the schools is the allocation of

the power to make important choices in the operation of the school. Community members have the authority to operate their local schools; decision-making and responsible action is in their hands.

It is also Havighurst's contention that there are three areas of school administration when the local communities are involved. These are the areas of budget, personnel and curriculum. The local community may be more involved in one area than another.

It is very important to keep a balance among the interest groups, the local community, the students, the teachers and the administrators (Havighurst, 1979:37-41).

V. Analytical Framework

The review of related literature has been used to create an analytical framework made up of key issues which should be addressed in nursing programs for students from cultural minority groups. The purpose of using such a framework is to analyse systematically the Blue Quills Nursing Project to determine to what extent the major issues were addressed.

The major issues will be divided into the following categories: program, administrative and governance. (See Table I.)

In the program category, two issues will be addressed: (a) academic preparation. Because the Blue Quills Centre has an "open admissions" policy and thus recruited students who did not meet the educational requirements for the Grant

TABLE I

Program Issues	Administrative Issues	Governance Issues
(a) Was the academic preparation issue addressed? (b) Was attention given to cultural content?	(a) How was the issue of student support services dealt with? Student support services will include the following: program advisement and coordination, tutorial services housing, financial support, day care facilities and the lack of laboratory/library facilities (b) What effect did decentralization have on the Project? (c) How were students selected and what implications did this have? (d) Did the short implementation time effect the Project?	(a) To what extent was there local control/involvement in the following areas: (1.) Budget (2.) Personnel Selection and (3.) Curriculum (b) What organizational pattern did the Nursing Project adopt?

MacEwan Diploma Nursing Program, hereinafter referred to as the Nursing Program, academic preparation is a significant issue; (b) cultural content. In what way was the Native culture reflected in the Nursing Program?

In the administrative category, four issues will be addressed: (a) the adequacy of student support services is the major area of discussion and will be analysed by each service: program advising and coordination, tutorial services, housing, financial support, day care facilities and lack of library and laboratory facilities.

(b) Did decentralization to a field centre have an effect on the Project? (c) How were the students selected and what significance did it have on the Project? (d) The Project was implemented on short notice. How was this dealt with?

The governance category will deal with two issues: (a) the extent of local control at Blue Quills in the areas of curriculum, personnel selection and budget. (b) What organizational pattern did the Blue Quills Project adopt?

In this chapter a review of the pertinent literature concerning Indian and other minority group students in post-secondary education has been presented. As well, there was a discussion of the organizational patterns of a number of Native teacher education programs. The analytical framework derived from the review of the literature was presented in the last section and will be used to analyse the Blue Quills Nursing Project in Chapter VI.

CHAPTER III

METHODOLOGY

The research methodology is presented in this chapter. The case study method and its relevance to this study is discussed in the first section. This is followed by a section on the methods used to collect the data. Next, the sources of data collection are outlined. In the final section the procedures used for analysis of the data are presented.

I. The Case Study Method and Its Relevance

The case study method was used for this study because it seemed to be most suitable--that is, to undertake a descriptive analysis of a pilot project from its conception up to the time of the study, when fourteen students transferred from Blue Quills to Grant MacEwan Community College in Edmonton in April 1982. An exploratory approach was taken which could be followed by a more ambitious study in the future which could include the part of the Project which continued in Edmonton.

The case study method permits "a very detailed descriptive analysis of some type of institution, community, group or situation, or of an individual." It also permits a situation to be described in depth in its natural setting. Records, correspondence, artifacts and

questionnaires can be used to add to data obtained through interviews. The case study can be used to describe past history or current events (Treece & Treece, 1973:164).

The case study is "almost synonymous" with descriptive research and has the advantage of allowing the freedom of making up procedures as the study goes along, since the full dimensions of the study are not known at the outset (Simon cited in Treece & Treece, 1973:24).

It is the view of Robert Stake (1978:7) that the case study method "has been tried and found to be a direct and satisfying way of adding to experience and improving understanding."

II. Methods of Data Collection

Due to the exploratory nature of the study and the various groups and individuals involved, several methods of data collection were used: (1) government documents, program descriptions, correspondence and records, and (2) open-ended interviews based on interview guides. Most of the interviews were taped on audio cassettes. Several interviews were carried out over the telephone.

Written Documents

Records, correspondence, government documents and program descriptions were used to obtain written information.

The use of records and correspondence is valuable as it allows the researcher to collect information over a long

period of time; furthermore it is unbiased, inexpensive and has already been collected (Treece & Treece, 1973:137).

Interview Guide

A number of interview guides were constructed with a list of topic areas based on the literature and knowledge of the project to be studied. The interview guides are contained in Appendix A.

A semi-standardized, nonscheduled interview was adopted for the study. The semi-standardized type of interview allowed a number of specific major questions to be asked, but beyond that, probing could be used (Treece & Treece, 1973: 121). The non-scheduled interview allows the researcher some choice in (1) the order of questions, (2) freedom to rephrase questions, (3) freedom to use probes if necessary (Gorden, 1975:61). This format allows for the collection of specific demographic and project data but permits the researcher to pursue topics which may yield valuable, unanticipated information.

The interview guide designed for the students included questions on demographic data, academic background, previous work experience and their reasons for choosing nursing. The remainder of the guide was less structured and dealt with their choice of the institution, information about the academic and student support services and any comments they had on other aspects of the project.

The interview guides for the Director of Nursing Education, the Project Supervisor, the Nursing Instructors and Council members were structured to the point that they were asked how they had been involved in such areas as: curriculum development, recruitment and selection, student support services and funding. Comments were solicited on other aspects of the program.

II. Sources of Data

The research was conducted during April and May, 1982 in the areas of St. Paul, Alberta and Edmonton, Alberta.

The coordinator of the Health Sciences program of Grant MacEwan Community College was contacted by telephone to advise her of the nature of the study and to ask for consent to interview her staff and the students. Verbal consent was given with assurance that a written approval for consent would not be necessary.

Verbal consent was also given by a member of the Blue Quills Native Education Council on behalf of the Council. A formal letter which had been prepared was not required. It appears in Appendix B.

The population that was asked to participate in the study was diverse: all of the nursing students, the project coordinators, the nursing instructors at the hospital, coordinators of the Health Science Department, Grant MacEwan Community College, members of the Blue Quills Native Education

Council, Athabasca University instructors, Medical Services Branch staff, staff and ex-staff of Blue Quills Centre.

Documents, correspondence, brochures and records provided by Medical Services Branch and Grant MacEwan Community College were analysed to obtain facts to substantiate verbal data and add new data.

III. Methods Used To Collect Data

After permission had been granted to interview the students, appointments were made with the students on site at Blue Quills and at the St. Therese Hospital in St. Paul. Since they were writing examinations and completing their clinical practicum at the time the field work was being conducted, interviews were scheduled at the convenience of the student and her instructor.

Other subjects were contacted individually in order to arrange an interview time. One exception was the Blue Quills Council members who were interviewed as a group at a meeting which was arranged by one member of the group. Two other individuals consented to be interviewed at the time of being contacted by long distance telephone.

The subjects were aware that they could refrain from being interviewed or refuse to answer certain questions.

Permission was granted by all subjects to be taped on audio cassettes; however, telephone interviews were not taped.

IV. Analysis of the Data

This study was exploratory in nature. The number of subjects interviewed was thirty-two in total.

Demographic data obtained from the students were compiled to develop a composite picture of the student population according to age group, sex, years of education, work experience, numbers and ages of children.

The remainder of the information from the students and other individuals was organized and presented with the historical overview in one chapter and a chronological description of the program as it was developed and implemented in a subsequent chapter.

Data describing the program were then analysed using a framework which was developed from relevant literature on minority students in post-secondary institutions, minority students in nursing education, Native Indian students in post-secondary education and the unique organizational structures which have been developed to deal with the issues described.

Summary

This chapter described the methodology of the study. The areas discussed include the case study method and its relevance to this study, the sources of data, the method used to collect the data and the procedures used to organize and analyse the data.

CHAPTER IV

HISTORY OF THE DEVELOPMENT OF THE PROJECT

I. Introduction

The Blue Quills Nursing Project, hereinafter referred to as the Nursing Project, found its roots in the struggle by the Native people of northeastern Alberta to overcome the dependence on church and government and thus determine the needs of their own people. This self-determination in the form of local control of education was finally won in 1970 by the Indian people of Blue Quills school, who represented seven local reserves. The Nursing Project was a result of this emancipation. The historical background preceding this event at Blue Quills dates back to 1931 when the institution was established as a residential school. In this chapter, that background will be described in two distinct periods of the School's history. The first period extended from the establishment of the School in 1931 to the Indian takeover in 1970. The second period began after the time of the takeover to the commencement of the Nursing Project in 1980. The first period will be briefly sketched, for the most part from information obtained from interviews with several Indian people who have lived this history. The second period will be traced in more detail, using data from interviews, correspondence and documents.

II. The Origin of Blue Quills School

The Blue Quills School is located in northeastern Alberta, 5 km west of St. Paul and 205 km northeast of Edmonton. It was built and funded by the federal government (Department of the Interior). The school was administered by the Oblate Order and staffed by the Grey Nuns (Persson, 1980:6).

Although most of the students who attended Blue Quills were from Saddle Lake, other reserves in the area, such as Beaver Lake, Whitefish Lake, Kehewin, Frog Lake and Cold Lake added their numbers to the student population. Except for the students from Cold Lake who were mostly Chipewyan-speaking, Cree was the language spoken by the majority of the students upon entering the school (Persson, 1980:6).

Although it was originally thought that a residential school for Roman Catholic students should be built on the Saddle Lake Reserve, it was later decided that it would be built near St. Paul. Not only would it be more central to the other reserves which it served but it would benefit from the proximity to the railway stations (Persson, 1980:54). On 09 October 1928, the federal government (Department of the Interior) acquired the land where the Blue Quills Residential School would be built (Persson, 1980:8).

Previous to December 1931, when Blue Quills accepted its first students, the Sacred Heart Mission at Saddle Lake was home for many of the students who were to be transferred to the new school. A former student remembers that period:

> That school [at Saddle Lake] was brought from Lac la Biche. It was pretty old. Grandfather thought it should be on the reserve. I guess the priests and nuns were so good to the Chief at the time, that he finally gave in and signed the papers. My grandfather was very upset because he didn't like anyone to take the school away, but what could he do?
>
> On 08 December 1931 we said our farewells to the Sacred Heart Mission on the reserve and our parents and we were ready to come to the new school. Each driver had five girls or five boys to a sleigh. It was almost dark when we arrived by sleigh from Saddle Lake. Everything was new. The dining room was filled with kids and parents . . . . The school was called after Chief Blue Quills.

III. Student Life At Blue Quills

While completing the customary eight grades at Blue Quills, student life consisted of a half-day school/half-day work program. The mornings, which started as early as six o'clock for the students, were spent in prayers, religious studies, and reading, writing and arithmetic. The girls spent their afternoons cooking, sewing and working in the laundry. The boys were kept busy milking the cows, working in the school's garden, picking rocks or doing hard labor for local farmers. A former Blue Quills student recalls some [of his] early experiences:

> After a few years at school, I learned to read a little. I could read that priests came from Europe. Also the books' interpretation was that Indians were savage people and didn't know anything. I remember a picture of an Indian, with a tomahawk, standing over a priest with his head cut open. There were other things against the Indians. Now I know, it wasn't true history.

The former students who attended Blue Quills in its early years have mixed feelings about their experiences. They appreciate the practical skills, such as sewing and

cooking, which were useful later while raising their often large families. However, still lingering are the vivid memories of the endless rounds of punishment that were meted out for transgressions, such as speaking their own language, telling their parents of their experiences in the school or running away. These behaviors and many others invoked the wrath of the Sisters of Charity. One woman commented when relating these experiences: "I think I must be exaggerating . . . . It took years and years to forget these ill feelings."

Fortunately, the relationship between the students and the nuns began to change gradually. As one woman explains:

> The latter years of my schooling . . . it was getting better. Girls were rebelling. . . . So the nuns knew they could not keep us down as slaves. They actually had to change their behavior. We were no dumb animals. We were starting to know we could stand up for ourselves.

It was about this same time that the country became involved in World War II. The policies of the federal government following this War would change the relationship between the church and the education of Indian students forever.

IV. Change in Federal Government Policy

From the late 1940s to 1960, the federal government began to change its philosophy of Indian education from one of segregation in church-operated residential schools, to one of assimilation into the larger society by integration. This new perspective on Indian education came about through

meetings held between 1946-48 by the Special Joint Committee of the Senate and the House of Commons on the Indian Act. The new Indian Act of 1951 also supported the idea of integration (Persson, 1980:102).

Policies were formulated which led to the establishment of more day schools and the bussing of students from reserves to provincial schools. By 1949, the government began to employ some teachers in church operated schools, until 1954 when all teachers were government employees (Persson, 1980: 102). The principal and the non-teaching staff of Blue Quills became members of the Public Service of Canada in 1969 (Persson, 1980:9). The church had lost its control over Indian education. It would be another ten years until the Indians at Blue Quills would change this form of control once again.

V. Indian Take-Over at Blue Quills

Although the federal government had replaced the church in the area of Indian education, the Indian people from the area surrounding Blue Quills were angered with events which were happening. Decisions about the education of Indians were being made by the government with little or no input from the Indian people. By 1969, a number of critical issues as outlined by the Honorable Jean Chretien, Minister of Indian Affairs and Northern Development known as the White Paper, in a Statement of the Government of Canada on Indian Policies, the Indian Association of Alberta's Red Paper

(Persson, 1980:9) in response to the White Paper, and a rumour that the Department of Indian Affairs was going to sell Blue Quills school to the town of St. Paul, united the people in a fight to control the operation of the institution themselves under government jurisdiction.

The Indian school committees of the St. Paul area became active in planning how to deal with the impending problem. They decided that they would hold a sit-in at Blue Quills during the summer of 1970 to bring attention to their cause.

The sit-in lasted from 14 July - 5 August and drew the support of many people. Government officials from Ottawa arrived at the school to negotiate. As one of the participants recalls: "It wasn't the right people that were sent because they didn't believe an Indian could run a school as such. So eventually, the committee had to go to Ottawa."

According to a group member, the group which travelled to Ottawa included: Harold Cardinal, president of the Indian Association of Alberta, Stanley Redcrow, the interim president of the Native Education Council and others: Alice Makokis, Edith Memnook, Mike Steinhauer, Isobel Steinhauer, Eugene Steinhauer, Louis McGillvray, Lawrence Quinney and an elder Jonas Cardinal.

The group was very persistent in its demands and refused to leave the office of the Minister of Indian Affairs, Jean Chretien until a decision was reached. Finally, it was

agreed that the Indian take-over of the operation of the Blue Quills school would be a pilot project.

The newly formed Blue Quills Native Education Council, made up of representatives from 11 reserves in northeastern Alberta, officially took over the administration of the school on 01 September 1970, thereby achieving a first of its kind in Canada.

According to a Council member, who was present during the takeover period, at that time there were one priest and several nuns remaining in administration, teaching and maintenance positions. They were asked to work for the Council, but chose not to, ending an era of church involvement in the education of Indian students at Blue Quills. The Indian people were moving into a new period--the period of self-determination.

VI. The Period of Self-Determination

After the take-over of the Blue Quills School by the Native Education Council changes began to take place. There was a phasing out of elementary grades to reserve schools, with the gradual addition of high school classes. By 1976, the Council had developed a proposal for a comprehensive post-secondary program for Indian people in the Saddle Lake/ Athabasca District. Northeastern Alberta was an area of rapid development and there was a recognition of the need to prepare Indian people for employment opportunities. Priorities were set in skilled trades and professional training,

based on a Northeastern Alberta Work Force Survey prepared by the Alberta Native Development Corporation.

According to Blue Quills documents and personnel, the philosophy that developed for the post-secondary programs was "Education Plus." This meant that the programs would offer the Blue Quills student opportunities equal to those available to students at other post-secondary institutions plus the additional emphasis on native studies such as Native Law and Native Philosophy.

Concerned with the needs of the people and the Blue Quills philosophy of "Education Plus", the Council prescribed the following programs as essential:

1. Teacher Education
2. Secretarial Training
3. Nursing Education
4. Public Service Administration
5. Social Work
6. Small Business Management
7. Liberal Arts and Sciences

Blue Quills had already launched one of these post-secondary programs on 02 September 1975. In cooperation with the University of Alberta, the teacher education program, Project Morningstar, was on its way.

By the fall of 1980, when the nursing program began at Blue Quills, the third Morningstar program was being completed, and all of the other programs, except Small Business Management, had been implemented. Because Blue Quills began to plan for a nursing program early in its post-secondary phase, it is interesting to trace the events which would take years to plan and a few months to implement.

VII. Planning for the Nursing Project Begins

The initial planning for the nursing project coincided with the beginning of the first Project Morningstar in September, 1975. Documents reveal that Mr. Richard Saunders, the Director of Program Development for Blue Quills, telephoned Dr. John Kirkbride, Regional Director, Medical Services Branch, Alberta Region, Health and Welfare Canada requesting a discussion about the development of a registered nursing program at Blue Quills. A meeting was arranged between Blue Quills representatives, Mike Steinhauer and Richard Saunders and Medical Services Branch, Northern Zone Director, Dr. W.A.G. Krynen. Various issues and concerns were discussed. It was suggested that Blue Quills submit a proposal, in light of these discussions. By the 14 October 1975, a submission entitled "Preliminary Proposal for a Research Project to Determine the Feasibility of a Native Nursing Program" was completed and sent to the Regional Director of the Medical Services Branch.

In this proposal, the Blue Quills Native Education Council recommended that a six month Native Registered Nurse Program Development project be undertaken to determine the feasibility of such a program. This would require that a qualified person hold extensive discussions with existing Schools of Nursing, potential groups of students, the nursing profession, funding agencies and the potential employers of graduates. Attention would also need to be paid to the

Report of the Task Force on Nursing Education in Alberta which had just been released.

The rationale for the program was as follows: there were many Alberta communities, especially in Northern Alberta, where professional health personnel were not available; in the areas where personnel were present, they were usually non-Native and tended to have high turnover rates. This resulted in an endless stream of health personnel who were not familiar with Native languages and culture, trying to deliver health care in communities where they were not known.

A Northeastern Alberta Work Force Study, prepared by the Alberta Native Development Corporation, had demonstrated to the Blue Quills Native Education Council that there were proportionately as many people from Native communities as in any other community who were interested in nursing. Although many Native people would meet the current entrance requirements to schools of nursing, there was a concern that many others who were potential students would require upgrading to meet these requirements. It was also suggested that a program operating outside of a major urban area, with supplementary student services, would alleviate some of the problems associated with Native students attempting to adjust to life in the city while coping with academic demands.

It was recommended in this proposal that entrance requirements would remain the same as for any other students.

However, the following modifications were seen as being pertinent:

a) Location of all or part of the training at a small centre, preferably in the North;

b) Location of a final part of the course at one of the existing major teaching hospitals;

c) Preparatory intensive upgrading, tutoring and counselling for students of exceptional motivation who lack some formal requirements.

A budget of $13,750 was submitted along with this proposal in October, 1975, requesting funding from the federal department, Health and Welfare Canada.

Several months following the submission of the proposal to Headquarters in Ottawa, the Assistant Deputy Minister, Mr. Charles Caron, visited Alberta Region and met with department officials and representatives of Blue Quills to discuss the proposal. It was recommended that the Blue Quills representatives visit the British Columbia Regional Office to explore the proposed nursing course for Native Indians at the British Columbia Institute of Technology (B.C.I.T.).

Mike Steinhauer and Richard Saunders from Blue Quills subsequently visited Vancouver and met with Dr. Gordon Butler, the Regional Director, and nursing personnel of Medical Services Branch, Pacific Region. Dr. Butler expressed concern that a nursing education program could perhaps not be filled by Treaty status applicants from Northeastern Alberta. However, Mr. Steinhauer and Mr. Saunders assured the British Columbia Regional personnel at the meeting

that no one would be excluded because of not having Treaty status.

In Alberta Region, senior nursing and medical personnel were concerned that the proposed program would be graduating hospital-oriented nurses at a time when federal health professionals were planning toward community-based programs. According to a senior federal nurse, a shortage of nurses did not exist at that time. Given these factors, and because of budgetary limitations, Dr. John Kirkbride, Regional Director determined that the program would not be supported at that time. In May 1976, following this decision, correspondence from Dr. Kirkbride to Headquarters in Ottawa stated that no further steps regarding the nursing program would be taken, unless advised to the contrary.

Although this was a major setback for Blue Quills, it did not stop them. Rather than looking at a feasibility study proposal, this time the Blue Quills Council decided it was going to have a proposal developed for a basic nursing diploma program.

VIII. The Grant MacEwan Community College Connection

Despite the unavailability of funds from either of the federal departments, Health and Welfare Canada or Indian Affairs and Northern Development, the Blue Quills Council maintained that the need for the program still existed. Details are sketchy but during the early part of 1977, a Blue Quills representative, Mr. Lynn Baker, contacted Grant MacEwan

Community College and discussed the Council's aspirations with people in the Continuing Education Division of the College which had the jurisdiction for Native Studies. Mr. Baker was asked to develop a proposal describing the nursing program requirements. Blue Quills did not, however, have any resource people with expertise in nursing education and a proposal was not prepared at this time. According to the coordinator of the Health Science Program, in the fall of 1977, Mr. Baker returned to Grant MacEwan Community College and was referred by the Continuing Education Division to the Health Sciences Department, where this expertise was available. Ms. Judith Prowse, the coordinator of the Health Sciences Program then met with Mr. Lynn Baker of Blue Quills, to discuss details of the basic nursing diploma program. A number of issues were explored.

The first consideration was that any new nursing programs would require the approval of Advanced Education and Manpower and the Universities Coordinating Council. This could have presented a problem, since new programs were not being approved at that time.

The second issue centered around Blue Quills' philosophy, which stressed the importance of program accessibility to students while they continued to live in their own area close to existing support systems. It was recognized, however, that this would limit the availability of facilities for clinical experiences.

The third and perhaps most fundamental issue was the question as to whether the basic nursing diploma program was the desired preparation. The graduates from the program might choose to return home to work in community health program, a position for which they would not be prepared or qualified.

The fourth concern was the inevitable need for funding for the program.

There was considerable change of personnel at Blue Quills while the planning process with Grant MacEwan Community College proceeded. Eugene Houle became Executive Director, replacing Mike Steinhauer. Lynn Baker, Director of Athabasca programs, was followed by a succession of people until John Ovens assumed the position. Mr. Ovens and Ms. Prowse continued to work on the plan.

Since Blue Quills maintained an open admission policy, students would be accepted who might not meet the entrance requirements for the nursing program. Athabasca University in Edmonton was already offering courses at Blue Quills, and expressed interest in providing the high school and non-nursing academic elective courses for this program as well. Transferability of credits to Grant MacEwan Community College was verified.

It was more than a year and a half before a package was prepared which the planners felt could be implemented. The target date for starting the program became September 1979. Once again, funding was unavailable.

IX. The Reinvolvement of Health and Welfare Canada: The Proposal is Rejuvenated

Following the May 1976 decision not to proceed with Blue Quills' proposed feasibility study, it was two years until Health and Welfare Canada again became actively involved with the program.

Regional Nursing Officer, Mrs. Heather Clayton, was appointed to Alberta Region in July 1977. Over the course of the next 12 to 18 months, the proposed nursing program was brought to her attention, and discussion ensued with members of the Blue Quill Native Education Council.

A number of key factors warranted the review of the proposed program as far as Health and Welfare personnel were concerned:

1. There were increasingly more nursing shortages in areas serving Indian people, especially in Northern Alberta;
2. The health status of Indians was continuing to decline in spite of additional funding for health care services; and
3. There was a concerted effort on the part of this department to encourage Indian people to determine their health care needs and priorities.

Department officials considered that the proposed nursing program had merit, in principle, but funding was not forthcoming in September, 1979, as had been hoped, due to a government policy of restraint on spending.

However, Blue Quills Council sent a copy of the proposal, which was to have been implemented in September 1979, to Mrs. Jean Goodwill, Native Health Advisor with Health and Welfare Canada in Ottawa. Mrs. Goodwill requested that Mrs. Clayton review the situation with Blue Quills Council and advise her as to what was happening. Mrs. Goodwill visited Blue Quills and met with members of the Council. This resulted in a resubmission of the proposal, with an updated budget, to Dr. Richard Nuttall, Regional Director, Alberta Region, on 11 December 1979.

Program Change is Recommended

According to documents, a meeting was held on 20 December 1979, between respresentatives of Blue Quills--John Ovens and Eugene Houle, and Health and Welfare--Dr. R. Nuttall, Heather Clayton and Northern Alberta Zone Director, Leo Sasakamoose. It was decided at this meeting that Alberta Regional personnel would negotiate with Grant MacEwan College to add a community health care component to the basic nursing diploma program at Grant MacEwan Community College. Although this would result in the addition of one year to the two year program, it would also qualify the graduates for positions with Health and Welfare, which require community health preparation. The community health component had been a stated concern of Health and Welfare personnel before May 1976; it was also an issue which had been discussed between

Blue Quills and Grant MacEwan Community College in the early planning phase.

It was later decided to accept the two year program without the community health aspect for two reasons:

1. The program would be considered a new program if it were to be extended to three years, and would thus require the approval of Advanced Education and Manpower and the Universities Coordinating Council; otherwise, the program was the Grant MacEwan basic nursing diploma program and would not need this approval.
2. The students might prefer to work in a hospital; if not, they would have the choice of attending university to take the B.Sc.N. degree which has a community health component, if they wished to work as community health nurses. It was now the end of 1979, with the program still in limbo.

The Search for Funds Continues

A meeting was called for 21 February 1980 at the Regional Office of Health and Welfare Canada, Medical Services, in downtown Edmonton. Participating at the meeting were representatives from the following agencies: Blue Quills Native Education Council, Grant MacEwan Community College and the Department of Indian Affairs and Northern Development, Alberta Social Services and Community Health and Alberta Advanced Education and Manpower and Medical Services Branch, Health and Welfare Canada.

Documents reveal that the main concern at this meeting was for the funding of the nursing program. It was decided that Medical Services would re-submit the proposal to Ottawa requesting that it be considered as a pilot project. The target date was set for September 1980, to coincide with the Blue Quills academic year.

Support from Indian Groups

The President of the Indian Association of Alberta, Mr. Joe Dion, wrote to Mme. Monique Begin, Minister of Health and Welfare in support of the proposed program. Included with the letter was a resolution from an All-Chiefs Conference, which took place 11 - 14 March 1980, where a favorable, unanimous decision of 54 - 0 was reached. The response to Mr. Dion's letter came dated 16 April, also indicating support for the program. Madame Begin stated that she had requested department officials to work out the details and sources of funding that would be necessary to institute this program.

The Resubmission and Approval of the Proposal

The Nursing Project proposal, as developed by Blue Quills and Grant MacEwan Community College, was once again sent to Ottawa on 13 March 1980, according to records.

In the proposal, it was recommended that the first part of the program should take place at Blue Quills (first year), after which time the students would relocate to Edmonton to

complete the diploma requirements. The program would have the same admission requirements, have the same content, and basically follow the curriculum of the Grant MacEwan Community College Diploma Nursing Program. The program would consist of a maximum of 20 students, mainly from the St. Paul area.

At a conference of all the Regional Directors of Health and Welfare, in April 1980, the proposal was discussed in detail, and received a favorable review.

Funding approval for a pilot project was received from Headquarters in Ottawa on 11 June 1980.

A Federal Hospital Transfer Agreement

The transfer of the federally operated Charles Camsell Hospital to the City of Edmonton figured prominently in the success of the negotiations for the Nursing Project. Although official transfer did not occur until 01 December 1980, discussion between the Indian Association of Alberta and Health and Welfare Canada had been taking place for many months. By July 1980, the conditions for the transfer were made known. In a letter from Monique Begin, Minister of Health and Welfare Canada, to Joe Dion, President of the Indian Association of Alberta, dated 13 July 1980, the Blue Quills Indian nursing program was amongst other programs and projects which were to "be implemented for the benefit of the Indian population". There was to be funding for a three year trial period up to the amount of $100,000 per year. A

summary of the events leading to approval of funding for the Blue Quills Nursing Diploma Project is shown in Table II.

Preparation for Program Implementation

Faced with a target date of September 1980, it was important that program implementation begin and progress quickly. There were priorities, such as advertising for a program supervisor, and obtaining student applications, which needed to be dealt with immediately. Due to staff turnover at Blue Quills, however, meetings did not take place until 04 July. Mrs. Clayton, who had been named as liaison for Health and Welfare, met with the Board of Directors of Blue Quills. The Council, which was made up of eleven elected representatives from seven reserves, was still unaware that funding had been approved. It was urgent that the Council find someone to complete the final administrative details with Health and Welfare and Grant MacEwan Community College. As well, a program supervisor was required. The Board asked Mike Steinhauer Acting Executive Director, to finalize the first task. They also named Jocelyn Sparks, Director of Athabasca Programs at Blue Quills, as the interim supervisor, at the end of July.

Due to various delays, the meeting to finalize the administrative details did not take place until 08 August. Time was running out.

It was on 11 August 1980 that Health and Welfare Canada, Alberta Region, confirmed with Blue Quills Native Education

TABLE II

Highlights from September 1975 to October 1980

September 1975	Blue Quills contacts Medical Services Branch Health and Welfare, Canada, Edmonton Regional office. Meeting with Medical Services Branch personnel.
October 1975	Feasibility proposal submitted to Regional Office Edmonton Alberta Region submits proposal to Ottawa.
March 1976	Mike Steinhauer and Richard Saunders met with Mr. C. Carson, Assistant Deputy Minister, Health and Welfare Canada and other senior Medical Services officials in Edmonton.
April 1976	Mike Steinhauer and Richard Saunders travel to Vancouver to meet with Medical Services Branch Regional personnel about program at British Columbia Institute of Technology.
May 1976	Program support declined at Regional level.
September 1977	Discussions between Blue Quills Centre and Grant MacEwan Community College and Health Sciences Department begin. Planning for program continues with a target date of September 1979 for program commencement.
September 1979	Funding unavailable; program at a stand-still. Involvement of Mrs. Goodwill, Native Health Advisor, Ottawa.
December 1979	Meeting of Blue Quills and Medical Services Branch personnel. Resubmission of proposal to Ottawa.
February 1980	Meeting of involved agencies to discuss funding.
March 1980	Support for program from Alberta Indian Association and Alberta chiefs. Proposal resubmitted to Ottawa as a pilot project.
June 1980	Funding approval received from Ottawa.
July 1980	Transfer of Charles Camsell Hospital made known.

Council the intent to negotiate a program contribution agreement for the funding of the Blue Quills Nursing Project for the proposed three year period in an amount not to exceed $300,000.

Commencement date was changed to 01 October 1980. The short lead time and delays made the administrative process demanding. In addition, the coordination of government funding, by fiscal year, with the academic year, necessitated considerable administrative manipulation, according to a government administrator. It was finally decided to administer the budget on a Phase I and Phase II basis. Phase I, the upgrading and non-nursing portion, covered the period from 01 October 1980 to 31 December 1981. Phase II, the nursing portion, extended from 01 January 1982 to 31 July 1983.

By 19 September 1980, the Blue Quills Native Education Council officially agreed to enter into a contribution agreement (This document, titled Objectives and Activities of Agreement is shown in Appendix C) with Health and Welfare Canada to jointly provide a basic Registered Nursing Diploma Program. (The names of Council members and those whose names appear on the document are presented in Appendix D). Documents show that the Board requested three changes to the master agreement:

1. that payments be made on a quarterly basis rather than monthly;

2. that an inflationary factor of nine percent per annum be added to the contract; and
3. that the "graduates of the program would be eligible to apply for licensure as registered nurses in Alberta after completion of the Canadian Registered Nurses examination."

By 03 October 1980, a quarterly advance of funds had been received by Blue Quills.

On the 06 October 1980 the first class of the pilot project had begun.

Summary

The historical background to the development of the Blue Quills Nursing Project was outlined in two periods preceding the Project. In the first period, events from the establishment of Blue Quills as a school to the Indian takeover of the school in 1970 were related. The second period follows the takeover to the time of the implementation of the Nursing Project in October 1980.

CHAPTER V

DESCRIPTION OF THE PROJECT AS DEVELOPED AND IMPLEMENTED

I. Overview of the Chapter

The Blue Quills Nursing Project was a pilot project instituted through the cooperative efforts of the Blue Quills Native Education Centre and Grant MacEwan Community College. The purpose of this project was to provide Native students with greater accessibility to a diploma nursing program by extending it to the Blue Quills Centre in rural, northeastern Alberta. The primary goal of the Blue Quills Centre and its governing Council was to provide an opportunity for more Natives to become registered nurses. This would result in increasing the number of qualified Native persons who could contribute to the health care of their own people on reserves and in hospitals.

The need for more qualified Native people prompted the Blue Quills Native Education Council to negotiate a program with several partners: Grant MacEwan Community College, Athabasca University and the Alberta Correspondence School.

The development and implementation of this program is described in this chapter.

II. The Expectations of The Blue Quills Council

The Blue Quills Native Education Council had determined that they wanted a Native registered nursing program as early

as 1975. The first request for funding was a proposal calling for a study of the feasibility of developing a Native registered nursing program. Although funding was not granted for this proposal, for reasons explained in the previous chapter, Blue Quills personnel continued with their efforts to establish such a program.

The initial contact with Grant MacEwan Community College, as far as can be determined, was with the Continuing Education Division of Grant MacEwan Community College. It was the responsibility of this Division, at that time, to provide the Native programs for the College.

On the advice of Continuing Education personnel, Blue Quills educational staff began discussions with the Health Services Department of the College. Through these discussions it was ascertained that the basic nursing diploma program could be offered by the Health Sciences Department. The outline of the Grant MacEwan Nursing Program is shown in Appendix E. The goal of basic nursing programs in Alberta according to the Coordinating Council of the Universities of Alberta, which regulates the schools of nursing in Alberta, is to prepare "the professional nurse capable of rendering safe and comprehensive nursing care at the general staff level" (Authority of the Coordinating Council of the Universities of Alberta 1970:3). Blue Quills wanted a program to prepare professional nurses.

There were other considerations that had to be addressed. In order to be admitted to the nursing program

the applicants would have to meet certain requirements. Those students admitted through the Blue Quills open admissions policy who did not meet these requirements would need an opportunity to do so. The Blue Quills Council wanted a portion of the program devoted to upgrading the education of the students. This would give accessibility to applicants both Native and non-Native, who may not have had the opportunity to continue their education at an earlier time but had the potential and ambition to become nurses.

It was originally the desire of the Blue Quills Council to base the complete nursing program at the Blue Quills Centre. However, due to the limited size of the local health agencies, they could not be used for intermediate and advanced clinical practice. Since program quality could not be compromised, both the Blue Quills Council and Grant MacEwan Community College nursing personnel agreed that the first part of the program from October 1980 to April 1982 which would include the upgrading, the electives and some of the nursing courses, would be offerd at the Blue Quills Centre, from October 1980 to April 1982. During the period from May 1982 - July 1983 students would complete the nursing courses at the Millwoods Campus of Grant MacEwan Community College in Edmonton.

Although Blue Quills Council wanted a Native Registered Nursing program, it settled for an established basic nursing diploma program with an upgrading component which would be offered in partnership with Grant MacEwan Community College

over a 34 month period. The students would be able to stay in the off-campus situation until the program demanded advanced facilities and resources which were available only in the urban area.

III. Blue Quills' Academic Partners

The Blue Quills Native Education Council had been involved in providing post-secondary education programs from the Blue Quills Native Education Centre since 1975, starting with the teacher education program, Morningstar. Other post-secondary programs included a Bachelor of Social Work degree program through the University of Calgary, Bachelor of Public Administration and Bachelor of Liberal Arts programs through Athabasca University, and a secretarial course through Alberta Vocational Centre at Lac La Biche. Blue Quills had been in operation as an institution providing post-secondary programs for five years before the nursing program was implemented. In October 1981 there were over 400 students enrolled, half of these were high school students. There were only two counsellors in student support services.

Grant MacEwan Community College had offered a basic nursing diploma program in Edmonton since September 1972. Extending the nursing program to an off-campus setting was a new experience for the Health Sciences Department.

Another partner, Athabasca University, basically a correspondence institution located in Edmonton, was already offering courses at Blue Quills. Arrangements to instruct

classes of students at Blue Quills had been in effect since 1975 with the commencement of the Morningstar teacher education program.

Athabasca University would be able to offer the high school and non-nursing courses required to enter the nursing program. With a coordinator for Athabasca University programs already on staff at Blue Quills, a partnership had already been established.

Alberta Correspondence School became involved after the Project started for only one mathematics course which some students repeated in order to obtain a better grade.

Athabasca University and the Alberta Correspondence School would fulfill their obligation to the program in Phase I (October 1980 to January 1982). Grant MacEwan Community College would be involved throughout Phase II (January 1982 to July 1983) until graduation.

IV. The Project as Negotiated

The nursing project was planned to extend over a 34 month period from October 1980 to July 1983. This period would be divided into two phases with one intake of students.

Phase I

According to the proposal put forward by the Blue Quills Native Education Centre, Phase I would extend from 01 October 1980 to 31 December 1981. During this period, potential

nursing students would be enrolled in: (1) high school upgrading and (2) Athabasca University courses equivalent to the service and elective courses required for the nursing curriculum. This would enable students to meet the admission requirements for the nursing program and complete the required service and elective courses.

There would be two types of admission requirements to consider for entry into the diploma nursing program. Students would require the appropriate upgrading if they did not have the entry requirements: regular and mature.

Regular admission would require that an applicant possess an Alberta high school diploma or equivalent with a mark of 50 percent or better in English 30, Biology 30, and two other 30 level matriculation subjects. An overall average of 60 percent or better in four subjects would be required.

Mature admission would require that applicants be 25 years of age or over and present a mark of 50 percent or more in three Alberta grade twelve 30 level matriculation subjects including English and biology.

The Athabasca University courses planned for Phase I which would be recognized by Grant MacEwan Community College were as follows:

Athabasca University Courses	Grant MacEwan Community College Service Courses (Required)
English 255	EN 100.3 Communications
Psychology 206	PY 101.3 Introductory Psychology
Psychology 228 (Units 1 & 2)	PY 301.3 Developmental Psychology
Sociology 208	SO 101.3 Introductory Sociology
Electives	
English 284 (Canadian Literature)	English Elective
Psychology 206 (Units 3 & 4)	Behavioral Sciences Elective
	Second Language Elective

Plans for the upgrading or high school courses were not specific until approval for the Project was received.

The first aid/cardio-pulmonary resuscitation course could be arranged through the local branch of St. John's Ambulance.

Phase II

The Nursing Project proposal stated that Phase II would extend from January 1982 to the end of July 1983. On entry this period, students would be formally admitted to the Grant MacEwan Basic Nursing Diploma Program. They would be given advanced standing for the courses which they had successfully completed in Phase I. Since the elective and service courses would be completed in Phase I, only nursing courses and clinical experience would be offered during Phase II.

For the first three and one half months, from January to mid-April 1982, students would remain at Blue Quills to take the following nursing courses:

Anatomy and Physiology (Parts I and II)

Nursing Fundamentals and its Clinical Component (Clinical Practice I)

Interpersonal Aspects of Nursing

St. Therese Hospital in St. Paul was to be available for the clinical practicum.

Following the transfer of the students from Blue Quills to the Grant MacEwan campus portion of the program, the remainder of the courses was to be as follows:

May and June/82
- Nursing - Mental Health Problems or Clinical Practice II

July and August/82
- Nursing - The Family
- Clinical Practice II or Mental Health Problems

September to December/82
- Nursing - Health Problems I
- Clinical Practice IV
- Health Sciences Ethics

January to April/83
- Nursing - Health Problems II
- Clinical Practice V

May to July/83 (Spring Session--nine weeks)
- Nursing (A Career)
- Clinical Practice VI

According to the Director of Health Services, all nursing students at Grant MacEwan Community College have the option of completing the last nursing course, which is a clinical practicum, at an accredited rural hospital. This experience is aimed at preparing the student for the job responsibilities assigned to nurses prepared at the diploma level. This would give the Blue Quills students the

opportunity to return to St. Therese Hospital in St. Paul not only because of its proximity to home but also for its potential for employment.

Upon the successful completion of the program of studies, arrangements would be made for students to write conjoint national comprehensive nursing examinations at Blue Quills in August 1983.

The examination serves a dual function: it is the final examination for the nursing program and the entrance examination for professional nursing practice. Successful candidates would receive a Diploma in Nursing from Grant MacEwan Community College and registration with the Alberta Association of Registered Nurses.

This was the Project as agreed to in September 1980, when Health and Welfare Canada signed a contribution agreement with the Blue Quills Native Education Council as shown in Appendix C. A major commitment had been made not only by Blue Quills but also by its major partners, Grant MacEwan Community College and Athabasca University.

V. The Process of Program Implementation

The Courses

Although Grant MacEwan Community College had stated that a maximum of 20 students would be accepted into the nursing program, 33 potential nursing students were selected to begin in October 1980. The Selection Committee consisted of: one Blue Quills Board Member, the Athabasca University Coordinator

at Blue Quills and the Regional Nursing Officer Health and Welfare Canada. Through the open admissions policy of the Blue Quills Native Education Centre, applicants were not denied admission if they were highly motivated to become nurses and if their academic background was not seriously deficient. On 6 October, a month after the regular programs had begun, due to a delay in final program funding approval, one male and 32 female candidates began their studies at Blue Quills. The group formed one class and immediately started the first course as shown in Appendix E. Until January 1982, the courses were offered by Athabasca University with two exceptions: mathematics was offered through the Alberta Correspondence School and Cree was arranged by Grant MacEwan Community College through Blue Quills. Although Athabasca University normally functions as a correspondence institution and uses tutors for individual follow-up, the number of students at Blue Quills taking Athabasca courses demanded a class/instructor situation. The courses ranged from five to seven weeks in length. The materials for the courses were often not available until the course was well underway possibly due to the short lead time that was available.

The instructor-student ratio ranged from 1:33 to 1:9. For example, the first course which had the full complement of 33 students, was a first year university level English course with a remedial component. Ideally, the instructor would have liked to have had ten students, but was faced with teaching 33 students, three hours a day, marking numerous

writing exercises and holding private tutorials in the afternoon. No other professional assistance was available. Twenty-seven students completed the first course.

The mathematics course, Mathematics 30, offered by the Alberta Correspondence School as upgrading, was particularly difficult for most students. Several students withdrew from the program at this time. In order to obtain a better grade some of the students repeated the course only to find that it was not a prerequisite. Although it satisfied an option for high school credits, it was the only one arranged for the students who assumed they had no alternative. The lack of planning time coupled with the fact that other programs at the Centre had commenced a month before this Project limited the choice of courses and instructors.

The Native course content for the program consisted of two courses: an English (Native Literature) and a language elective (Cree). These courses were arranged after the project started. Students who already had credit for the English course chose to take general administration or another elective. All nursing students took the language course.

The English elective was a course in Native Literature, officially Canadian Literature in Progress. This course was a literary study of key Native figures and western Native writers such as Ahenakew and Campbell. It gave the students insight into the rich history of the Native people from before the coming of the White man to the present.

Cree was offered instead of French as the language elective. Since Athabasca University did not have an instructor to teach Cree, Grant MacEwan Community College made arrangements through Blue Quills Council to have a local Cree teacher offer the course. Part of the course included the study of nursing/medical terms which students might encounter in their work with Native patients. Five weeks were allotted to the course.

Once the service and elective courses were completed, the nursing courses began in January 1982. Up to this point, the students had been taking courses consecutively, in short time frames. The pace became even more demanding. Time frames were still short but more work had to be accomplished.

The anatomy and physiology courses were taught consecutively for three hours a day, four days a week for 12 weeks (six weeks for each course) by a biology instructor. The course content was detailed and lengthy, necessitating a rapid pace to cover required material. Students' questions which involved interpreting anatomy and physiology beyond the biology level went unanswered as the instructor had neither a nursing nor a medical orientation. The laboratory facilities, library resources and equipment necessary for demonstration and study were available only if brought from Grant MacEwan.

The examinations in the anatomy and physiology courses were also difficult for many students. Although no one

failed the courses, nine of the fourteen students obtained a low pass even after rewriting the examination.

The nursing fundamentals courses were offered concurrently with anatomy and physiology. The clinical practicum which ordinarily accompanied the fundamentals course was postponed due to a nurses' strike at the hospital. The limited facilities and equipment available at Blue Quills restricted the opportunities for students to practice those skills demonstrated in the classroom.

The project supervisor, who had been hired only as the nursing segment of the program started in January 1982, taught the course but was occupied with administrative responsibilities which minimized the out of class time that she had to spend with the students.

The nurses' strike ended just in time to allow the students to complete their first clinical practicum before transferring to Edmonton.

The Students' Clinical Experience

According to the Project supervisor when interviewed, the 120 hours of clinical experience during the Blue Quills portion of the project were arranged with St. Therese Hospital in St. Paul. Through a cooperative arrangement with the Director of Nursing at St. Therese Hospital, the Blue Quills project supervisor found two qualified instructors from the part-time staff of the hospital. The instructors were paid by Grant MacEwan Community College during the

practicum. It was the responsibility of the project supervisor to brief the new instructors and ensure coordination between Blue Quills and the hospital.

They discussed the nursing fundamentals information that had been taken in class since the clinical instructors had had no exposure to the Blue Quills classroom experience. The required skills and techniques to be developed during the course of the experience were outlined according to the standards of the Health Science Department of Grant MacEwan Community College. The process of evaluation and the evaluation form were also explained to the instructors.

The clinical experience which was to have commenced in mid-February 1982 did not do so until the 15 March 1982 due to a nurses' strike at the hospital. This interfered with the clinical practice which had been planned to coincide with most of the nursing fundamentals course which had begun in January.

While the hospital was returning to normal after the strike, the nursing director of the extended health care facility in St. Paul invited the students to spend six hours on two mornings developing basic skills. The Project supervisor stated that it was an unexpected opportunity for the students to develop some communication skills, augmenting the communications course currently being taught.

By the time the students actually started the practicum at the hospital, many of the procedures and techniques which had been discussed in the classroom since the beginning of

January had been forgotten. Because there were no laboratory facilities at Blue Quills Centre, most of the students were practising basic skills and techniques such as dressing applications and aseptic technique for the first time when they reached the hospital setting.

The four students who were Registered Nursing Assistants and were familiar with the hospital had a definite advantage over the other students. There were some students who were experiencing the hospital as a work setting for the first time.

According to the instructors, some difficulties were encountered by the instructors and students. Each instructor had a group of seven students. The group changed wards and instructors halfway through the experience. In each group were students with varying levels of knowledge and skills. The instructors aimed their instruction at the average level which left some of the students bored and others threatened. Most students required extra help when carrying out procedures, making it difficult for the instructors to be in several places at one time. It was too late, however, to change the instructor-student ratio. The time remaining in Phase I was running out and the students were already planning to transfer to Edmonton.

VI. Nursing Student Profile

The Nursing Student Group Emerges

Once the financial arrangements for the Blue Quills Nursing Project had been made, after several years of discussion, the Project came on stream very quickly. Students were interviewed over a period of three days in mid-September following advertisements in the Alberta Native Communication Society journal, the St. Paul Journal, radio and through personal contacts by Blue Quills personnel.

Interviewers were looking for a basic degree of commitment and maturity since the experience at Blue Quills had been that the mature students were very successful in that setting. No formal testing took place.

Although records were not kept of the initial student population of 33 that were accepted into the project in October 1980, personnel who were either teaching or counselling at this time report that this group of students was mature and highly motivated to become nurses.

Despite these favorable circumstances, a relatively high proportion of students failed to continue into the second phase of the program. There were a number of reasons why students left the program according to persons interviewed. The instructor who taught the first course English 255, stated that in her opinion all of the students were capable of meeting the requirements but in a longer period of time. An extended program and extra academic counselling were not possibilities at that stage. Although Athabasca University

did offer a reading and study skills course at the beginning of the Project, it was an option and many students did not take advantage of it.

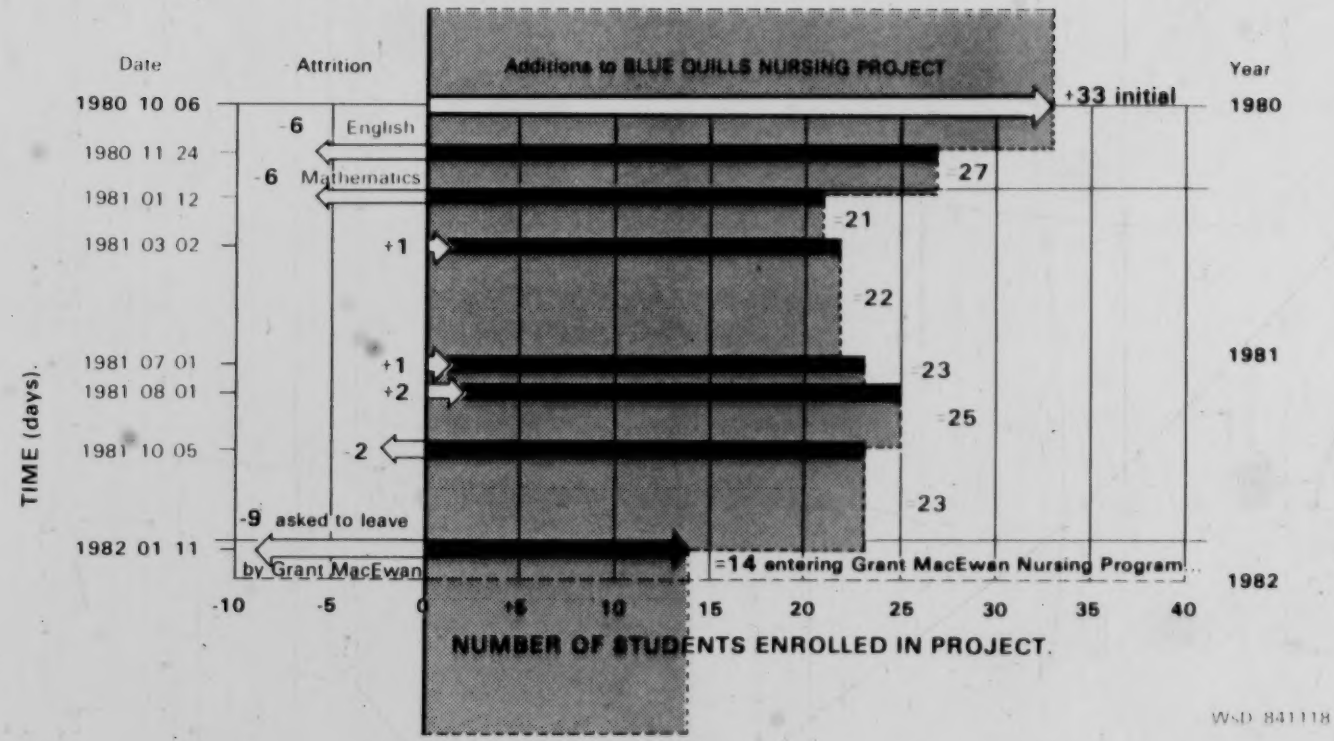
Students dropped out because they did not have the skills to keep up with the pace. Others stayed in even after they had failed a course, hoping that they could catch up. Further attrition occurred because of family responsibilities that could not be delegated and the lack of adequate, planned holiday time.

At the end of the first class in November 1980, 27 of the 33 students remained as portrayed in Figure I. Exact numbers are not available but several students withdrew during or after the mathematics course. One student joined in March 1981, another one in July 1981 and two in August 1981. These students had already completed some of the requirements for entrance into the nursing program.

By January 11, 1982, there were still 23 students who expected to be a part of the nursing group. When each student's academic record had been assessed by the new project supervisor, nine students were asked to leave the program. The remaining 14 female students composed the nursing group.

By the third week in January 1982, 14 students were officially admitted into the Grant MacEwan basic nursing diploma program. Students came from various age groups, cultural, educational and employment backgrounds. Their

Figure 1: Student Attrition.



personal responsibilites and reasons for choosing the nursing program also varied.

The 14 students ranged in ages from 21 to 42 years with a median age of 29 years (Table III).

TABLE III

Age Distribution of Nursing Students at the Beginning of Phase II (January, 1982)

Age in Years	Number of Students	%
21 - 25	4	29
26 - 30	4	29
31 - 35	3	21
36 - 40	1	7
41 - 45	2	14

n = 14

The marital status of the students is outlined in Table IV.

TABLE IV

Martial Status

Status	Number of Students	%
Married	8	57
Single	4	29
Separated	1	7
Divorced	1	7

n = 14

As well as the academic responsibilities, 11 (79 percent) of the students also had dependents, ranging from infancy to 17 years of age (Table V).

TABLE V

Number of Dependents/Student

Number of Dependents	Number of Students
0	3
1	2
2	4
3	2
4 or more	3

TABLE VI

Age Distribution of Dependents of Nursing Students

Ages (Years)	Number of Dependents
0 - 5	10
6 - 10	5
11 - 15	9
15 - 20	5

The program was originally planned for Native students. However, the open admission policy did not limit the intake to Native people. The nursing class was composed of nine (64 percent) Native students, of which seven (50 percent) were status Indians and two (14 percent) non-status Indians of

Metis. The remaining five students (37 percent) were non-Native (Table IV).

TABLE VII

Student Native Status

	Number of Students (%)
Native--Status	7 (50%)
Non-Status/Metis	2 (14%)
Non-Native	5 (37%)

The educational background of the nursing students varied considerably. Although seven (50 percent) of the students had completed Grade 12, the remainder of the students ranged from having completed Grade 7 to Grade 11 (Table VIII).

TABLE VIII

Secondary Education Attained by Students

Grade	Number of Students Completed	%
12	7	50
11	3	22
10	2	14
9	1	7
8	0	0
7	1	7

The length of time since students had finished school varied as well. Only seven (50 percent) of the students had completed their secondary schooling since 1971. The other seven (50 percent) had taken their highest grade between 1956 and 1970 (Table IX).

TABLE IX

Period Highest Grade Completed

5 Year Period	Number of Students
1956 - 60	3
1961 - 65	3
1966 - 70	1
1971 - 75	5
1976 - 80	2

Most of the students had some post-secondary education. There were five (36 percent) students who had started university or college courses but had not completed them (Table X).

TABLE X

Post-Secondary Education Completed

Course	Attendance (Time)	Number of Students
Registered Nursing Assistant	10 months	4
Liberal Arts--		
University of Alberta	1 year	1
Blue Quills	3 years	1
Bachelor of Education--		
University of Alberta	1 year	1
Nursing--	1 year	1
College Program	1 month	1
Community Health Worker Program	10 months	1
Accounting and Bookkeeping course	11 months	1
Secretarial course--		
Alberta Vocational College	1 year	1

The nursing students had had a wide range of work experiences. Eight (57 percent) of the students had had health-related experiences (Table XI). Four (29 percent) students were Registered Nursing Assistants with experience ranging from five years to 17 years. One (seven percent) student worked in an isolated area as a Community Health Worker for two years before entering the program. Two (14 percent) students were employed as ward aides at a local hospital and extended care unit respectively. One (seven

percent) student's experience was as a medical records clerk.

TABLE XI

Health-Related Work Experience

Type of Experience	Length of Time Full Time	Part Time
4 Registered Nursing Assistants	17 years	-
	4 years	3 years
	5 years	-
	12 years	8 years
1 Community Health Worker	2 years	
2 Wards Aides	3 years	
		4 months
1 Hospital Medical Records Clerk	1.5 years	

Part of the work experience was non-health related and involved eight (57 percent) of the students, of which two (14 percent) also had had some health-related experience.

TABLE XII

Non-Health Related Work Experience

Type of Experience	Length of Time
Labour (factory)	9 years
Hospital Housekeeper	4 months
Teacher Aide	1 year
Clinic Receptionist	3.5 years
Alcohol Counsellor	1 year
Personal Secretary	1.5 years
Junior Accountant	3 months
Student Employment with Indian Band	4 months
Clerk	1 year
Process Operator	3 years
Secretary - Bookkeeper	2.25 years
School Bus Driver	6 years

The nursing students had expressed many different reasons for choosing nursing. Most students had more than one reason. The most frequent reasons were that they had always wanted to be a nurse (4) or they had had a previous experience with a health agency or chronically-ill family member (4). The desire to help their own (Native) people (3) and the closeness to home (3) were the next most frequently expressed reasons. Financial independence (2), job security

(2), and career opportunities (2) were also stated. Other singular reasons were given as well (Table XIII).

TABLE XIII

Reasons for Choosing Nursing

Reason	Number of Students
Always wanted to be a nurse	4
Previous experience	4
Desire to help their own (Native) people	3
Proximity to home	3
Financial independence	2
Job security	2
Career	2
Likes working with people	1
Try something different	1
All was being paid for	1
Didn't like teaching	1
Nurses in isolated areas get to do so much	1
Opportunity to meet entrance requirements before program started	1
Desire to work in public health-home care	1
Desire to work in nursing administration	1

VI. Geographic Accessibility

The program was not equally accessible to all students. While most of the students were within commuting distance from Blue Quills Centre, others chose to leave their home area to take advantage of the opportunity.

Nine (64 percent) of the students lived within a 63 km radius of Blue Quills Centre. One (seven percent) lived in the 64 - 160 km limit; while there were four (29 percent) of the group whose home was 161 km or more away. Five (36 percent) of the students relocated because of the distance from their home (Table XIV).

TABLE XIV

Distance of Students From Home

Kilometers	(Miles)	Number of Students	(%)
0 - 63	0 - 39	9	64
64 - 160	40 - 99	1	7
161	100	4	29

The student profile describes a group of students from a variety of backgrounds who have evolved into the first nursing class at the Blue Quills Native Education Centre.

VII. The Provision of Student Support Services

In the Blue Quills Project, Grant MacEwan Community College and Athabasca University were responsible for the academic program; Blue Quills was responsible for the student support services. These services are the non-instructional services which support the teaching-learning process and include tutorial services, personal counselling, program advisement and coordination, laboratory and library facilities, student finances, housing and day care facilities. Each institution had an agent to monitor its respective responsibility area. The overall coordination was the responsibility of the Blue Quills Native Education Council.

Tutorial Services

In the planning phase of the program, the need for the provision of tutorial assistance was identified. Since academic services were already in place at Blue Quills, they were to be extended to the potential nursing students as well.

Essentially, students had to rely on the instructors for tutorial assistance since there were only two counsellors available in student support services. Even in a large class of 33 students where there was a remedial component, one instructor was responsible for class preparation and presentation, marking assignments and tutoring students. In the judgment of this instructor an ideal number of students

would have been ten. The program coordinator took a different standpoint, however, and stated that since there was only one course being taken at a time, it was not unrealistic to expect an instructor to tutor students along with the other duties. The instructors continued as tutors throughout the period at Blue Quills.

Personal Counselling

A counselling service was provided by the student services at Blue Quills. The service was organized mainly to help students who were experiencing personal, family and financial problems. For instance, if students wanted information on budgeting or on obtaining financial assistance, they could seek help from student services. An emergency revolving loan fund was set up to help students who needed to borrow small amounts of money until they were paid.

Students were familiar with students services counsellors, who were for the most part from the same reserve. This made it difficult for some students to discuss personal problems since they didn't know if confidentiality would be maintained. There was less hesitation in seeking financial aid or information of an objective nature.

Program Advisement and Coordination

Program advisement refers to the guidance given to students as to their course requirements for the program.

Program coordination is the synchronization of the courses between institutions in order that the prescribed requirements are available to the students.

The nursing program had three project supervisors over the period from October 1980 to April 1982. The first two persons were appointed by Blue Quills as interim co-ordinators. They were already on staff at Blue Quills and were given the program advising and coordinating assignments as extra duties. The third supervisor was hired by Grant MacEwan, with input from Blue Quills, although it was supposed to have been the reverse situation. Blue Quills had not been able to attract a supervisor with suitable qualifications so asked Grant MacEwan to do so since this person would be transferring to Edmonton with the students. Although Grant MacEwan had advertised the position in the summer of 1981, a qualified nurse who was willing to work in an off/on campus arrangement, was not found until December 1981. She started as project supervisor when the nursing portion of the program began in January 1982.

1. Advisement and Coordination in Phase I

There were some difficulties experienced in the program advisement and coordination services as reported by the students when interviewed.

Some students were not given accurate information concerning the courses they required to meet admission requirements to the nursing program.

One student was told she did not have to take the English course only to discover at a later date that she did. She made arrangements to take the course by correspondence through Athabasca University while still at Blue Quills.

Several students were given incorrect advice concerning the non-nursing courses that they required. This resulted in students remaining in the program until January 1982 and were then asked to leave the program as they were missing basic introductory courses such as developmental psychology or one introductory course and an option. If they were missing only an option they could remain in the program. However, if they had more than one extra course, they would not be able to cope with the workload.

A situation where program advisement and program co-ordination were both in question was the Mathematics 30 course. Students were advised that they needed the course. The course was arranged with the Alberta Correspondence School. The course was difficult, resulting in the withdrawal of several students. Others repeated the course only to find later that mathematics was not a prescribed course.

Initially, much information was given to students verbally. There was little or no follow-up in writing. Consequently, during Phase I students were unsure of what courses would be offered until a week before the course began. Students were also given to understand that finances would be provided as part of the program, and that

accommodation and day care services would be arranged before the transfer to Edmonton. There were no written communications on these matters.

Program coordination also involved getting the packaged course materials from Athabasca University to Blue Quills. There were several courses where students received the materials after the courses began.

2. Advisement and Coordination in Phase II

The advisement and coordination during Phase II was the responsibility of a new project supervisor. It had been intended that the supervisor for the nursing component of the program would start working part-time in September 1981, during Phase I, to familiarize herself with the students and the program before assuming a full-time position in January 1982. It was difficult to find a person who could meet the qualifications and requirements. The candidate not only had to meet the qualifications of a nursing instructor at Grant MacEwan but also had to be willing to work in an on/off campus situation, between Grant MacEwan and Blue Quills. The person would be required to remain until the end of the program in August 1983 to maintain continuity. A qualified person who was willing to take on the challenge was hired by Grant MacEwan Community College in December 1981 solely for the project, to begin work in January 1982. Blue Quills Council gave its approval to the decision.

Laboratory and Library Facilities

Essential to a nursing program is the availability of laboratory and library facilities.

Since a major part of each nursing course involves laboratory and clinical experiences, students must have access to facilities where they are able to have procedures and techniques demonstrated to them, as well as the opportunity to practice them. The Blue Quills students had minimal facilities. Some procedures were demonstrated in the classroom. Video cassettes were briefly available in order that students could view procedures and techniques, such as aseptic technique. The cassettes were only on short loan from the Grant MacEwan Community College Resource Centre. Consequently, the students who had not worked in a hospital were faced with practicing most of the skills in the real situation.

Most library resources were obtained by the instructors from Edmonton, or from the local library. A few students were able to obtain resources from the hospital. However, the Blue Quills library was being reorganized and information was not available by topic. Nursing literature was non-existent in the library.

Student Finances

None of the students, including the non-Native students, were obliged to bear the cost of books or tuition, as this had

been included in the program budget, which was being funded by Health and Welfare Canada.

Financial assistance for other expenses such as housing, transportation, food, and clothing was a more complicated process.

The students who were status Indians were given financial assistance by the Department of Indian Affairs and Northern Development. This included 60 percent of accommodation costs, food and clothing allowance, transportation and child care allowance. Non-status Indian, Metis and non-Native students were compelled to seek bursaries and loans, although it had been their understanding before entering the program that their expenses would be covered by the project budget. This caused hardship and stress for students who were unable to obtain funding. Two students who were Registered Nursing Assistants continued to work as long as possible while at St. Paul. One student worked as supervisor in the residence at Blue Quills. By May 1982, the Blue Quills Council was successful in obtaining extra finances from Health and Welfare Canada through a 16.8 percent inflation increase and funding from the federal department of Employment and Immigration. This assisted the non-status, Metis and non-Native students with 60 percent of accommodation costs plus a transportation and day care allowance. Loans and bursaries could still be requested to meet further needs.

Day Care Facilities

The Blue Quills Day Care Centre was originally established to assist mothers of young children who were taking the teacher education program or the secretarial course.

As the post-secondary programs expanded, so did the need for day care facilities. At the time the nursing project started, there were approximately 100 children arriving at Blue Quills Day Care Centre each day to be cared for while their mothers were studying. With limited funding and inadequate facilities, Blue Quills Council found it necessary to seek additional resources. The Department of Indian Affairs and Northern Development was not prepared to extend financial assistance beyond the level of the funding they were giving for students and educational programs. The provincial government would not render assistance for two reasons given on different occasions: first, the day care centre did not meet provincial standards and therefore could not be granted funds; secondly, the Centre was on federal land.

The Department of Health and Welfare Canada eventually gave funding in the amount of $20,000 in September 1981 and $15,000 in February 1982, since this service had been overlooked in the initial agreement. Students would still be charged a fee of $3 a day for the first child and $1.50 a day for each subsequent child to offset some of the expenses.

The day care centre was heavily patronized during Phase I. Of an enrollment of approximately 100 children, about 30

belonged to students in the nursing project. By Phase II, there were ten dependents of nursing students between the ages of six months to five years. Of this number, seven were using the day care facilities. The three children, of one of the students, were being cared for at home on the reserve.

The day care centre was able to accommodate to the needs of the nursing students when they started the clinical practicum. A staff member was on duty early to allow the students to deliver their children and still have time to drive to the hospital in St. Paul before seven-thirty in the morning.

The day care workers were Native people. It was usual for the children to hear the Cree language spoken. Babies were comforted in the hanging cradle still used in Native homes.

Day care facilities at Blue Quills continued in spite of obstacles, in order that students with children might have an opportunity to continue their education.

The Transfer of Students to Edmonton

On 03 May 1982, the 14 students were to begin classes on the Millwoods Campus of Grant MacEwan Community College in Edmonton. There was a two-week break in the academic calendar to enable students to relocate to Edmonton. Housing and day care services were the two major arrangements to be considered.

A number of students stated that they were upset to learn a few weeks before the transfer that they would have to find their own accommodation and day care services in Edmonton. Early in the program, they had been given to understand that these arrangements would be made for them. The project supervisor was able to alleviate some of their fears by giving the students a list of accommodations and day care facilities within the general area of the campus. Since the project supervisor would also be in Edmonton, the students had a resource person who could be contacted should problems arise. The transfer would be a critical milestone.

During the last two weeks of April, the students began to look for accommodation in Edmonton. It was not the ideal time to find rental housing because accommodation was at a premium. However, all students were successful in finding suitable apartments within six to eight blocks of the campus. Extra financial assistance for accommodation was given to the students being supported by Indian Affairs since the costs in Edmonton were considerably higher than in St. Paul. The non-Native students and non-status/Metis were beginning to receive some funding through Blue Quills to assist with the extra living costs in the city.

When interviewed, the project supervisor stated that she had helped seven students to find accommodation and four to find day care services. The Native students experienced some discrimination. They would make arrangements by telephone only to be told when they arrived in person that the place

had been rented or needed painting. One student was asked if she was on welfare. If the student was accompanied by the supervisor, there was no problem getting service. On one occasion, however, the person proceeded to talk to the instructor, although the student was present. If the student was more assertive, however, that situation did not occur.

For the students who had not lived in an urban area before, there was some orientation required. Some of the students had never had a bank account or a credit rating. Their cheques were being held for two weeks because of this, depriving them of much needed money. Such matters as how to protect oneself by locking doors, avoiding the carrying of large amounts of cash, walking in safe areas, and insuring oneself and personal property were discussed with them.

There was still much to learn and experience in the urban area but 14 students had successfully transferred to Edmonton.

Summary

The Blue Quills Diploma Nursing Project has been described through the developmental and implementation stages to the time when the students were transferred to Edmonton. Blue Quills Native Education Council entered into a partnership with several academic institutions to prepare professional nurses. This partnership demanded unique organizational and administrative arrangements to meet program requirements and student needs. A number of concerns

arising from these arrangements have been outlined and will be discussed in the next chapter.

CHAPTER VI

ANALYSIS OF THE ISSUES

The analytical framework outlined and discussed in Chapter II following the review of the related literature will be used in this chapter to determine whether the Blue Quills Nursing Pilot Project experienced the issues anticipated in the literature and to what extent they were able to address those issues.

The major issues will be discussed in the following categories as outlined in Table I, page 33: (1) program; (2) administrative; and (3) governance.

I. Program Issues

The following program issues will be addressed: (1) lack of academic preparation, and (2) cultural content.

Lack of Academic Preparation

The Blue Quills Native Education Project attempted to address the needs of the students in terms of their lack of academic preparation by offering an upgrading component as well as service and elective courses which would give them the entrance requirements for the Nursing Program. Remedial programming, however, was not an integral part of the Project during the period at the Blue Quills Native Education Centre.

The first English course had a remedial component built into the curriculum but this was not the case with other courses.

A short study skills course was offered to the students by Athabasca University as the Project began but many of the students did not attend.

From October 1980 to May 1982 when the students transferred to Edmonton, there were four main program delivery areas which need to be addressed in terms of meeting the needs of students who lack academic preparation. These areas are: high school upgrading, the service and elective courses, the nursing courses, and the clinical experience.

1. High School Upgrading

The high school upgrading was the key to meeting the entrance requirements. Students were interviewed in the courses mid-August 1980 and started classes less than two months later on October 3. The courses were offered consecutively, each lasting seven weeks. The time factor proved to be critical to some students who dropped out. One instructor stated that all of the students had the ability to learn if given more time but they did not have that alternative.

Remedial programming was not built into the upgrading except for one course and tutoring was available from the instructors.

2. Service and Elective Courses

The service and elective courses were offered consecutively over an even shorter time period of five weeks each.

The instructors came from outside institutions except for two courses taught by Blue Quills staff, one a psychology course and the other the Cree language course. The courses followed established curriculum with little or no continuity from one course to another since only one instructor returned to teach a second course. As well, with several courses, material did not arrive until the course had been underway for a week. Students stated that they found this very upsetting.

3. Nursing Courses

The pace of the program increased rapidly with the official commencement of the Grant MacEwan Nursing Program in January 1982. Students were compelled to carry three courses concurrently with the clinical experience during part of this time. Three factors during this period posed problems in the area of program quality. The first had to do with the choice of instructor for the anatomy and physiology course; the second, the nurses strike at the hospital which delayed the clinical practicum; and the third, the mix of students in terms of prior clinical experience.

The anatomy and physiology course, one of the first courses in Phase II, proved to be one of the most difficult

and unsatisfactory courses, according to the students. The instructor hired by Grant MacEwan College to teach only this course, was a biology teacher who was not prepared to teach anatomy and physiology to nursing students. The course, which is normally covered in two semesters on the Grant MacEwan campus was taught for three hours, four days a week for twelve weeks. The students had access to laboratory and library resources related to nursing only if they were brought from Edmonton by the project supervisor. It was a struggle for most of the students to pass the course. All of the students eventually passed but even after rewriting the examination nine of the fourteen nursing students received a low pass.

4. Clinical Experience

The plan for the students to have their practical experience coincide with their classroom work required some rearrangements due to the nurses' strike in the Province of Alberta. Fortunately, the strike ended in time for the students to complete their practicum but many of the procedures had to be reviewed because the theoretical classroom instruction had been completed as much as two months before the practicum could get under way. The fact that the students did not have laboratory facilities in which to practice while the strike was on did not help the situation.

Five of the fourteen students who remained in the program were Registered Nursing Assistants and four of the five Registered Nursing Assistants were non-Native.

Four students said that the disparity between the students who were nursing assistants and the other students made the practicum situation difficult as some students felt intimidated. This may have been accentuated because the students who were not Registered Nursing Assistants did not have facilities in which to practice before being placed in the hospital.

The lack of academic preparation put the Blue Quills students in a difficult situation. They had access to the Project but no consideration was given to the individual's ability to learn. The pace was rapid and all students were expected to move at the same speed, in spite of the lack of quality remedial programming.

In the planning phase of the Blue Quills Nursing Pilot Project, the need for remedial programming was identified. The Blue Quills Native Education Centre assumed that their existing student counselling service would suffice. With an enrollment exceeding four hundred high school and post-secondary students, the remedial counselling services were staffed inadequately and the students in the Nursing Project were dependant upon their instructors for whatever remedial assistance they received.

Gilmour (1974:10) is of the opinion that nursing education has often concentrated on flexible admission requirements rather than the quality of the program itself. It appears as though the Blue Quills Project may have followed in the footsteps of the nursing education programs.

Cultural Content

Given the short implementation time, Blue Quills Nursing Project personnel did well to incorporate two courses with Native cultural content. It gave the Native students an opportunity to learn more about their own culture and language. It also provided the non-Native students with an opportunity that they may not have had in a regular nursing program. These students were encouraged to join other programs, and a number did that.

The program advisement and coordination role was performed by interim coordinators who already had full time duties at Blue Quills.

The program advisement and coordination function did not receive the attention that was required in this project. Interim coordinators from the Blue Quills staff either did not have sufficient time to have students' academic records assessed correctly or there was not enough coordination between the receiving institution, that is Grant MacEwan Community College, at an early enough stage to give students a clear picture, in writing, of what courses they must complete before being accepted into the nursing program.

II. Administrative Issues

The two major issues in this category are: (1) inadequate student support services which include: (a) personal counselling, advisement and coordination; (b) tutorial services; (c) housing; (d) financial support; (e) day care facilities and (f) the lack of library/laboratory facilities; (2) decentralization, (3) selection of students and (4) implementation time factor.

Inadequate Student Support Services

(a) Personal Counselling

In late 1981, two potential graduates of the Bachelor of Social Work program initiated a counselling service to help students with career counselling, as well as financial, personal and family concerns. Some of the nursing students took advantage of the service. For the most part, they discussed their concerns with their colleagues and their instructors, but mostly with their project supervisor. The fact that the potential nursing students in Phase I did not have the continuity of a coordinator or project supervisor was unfortunate. The student councellors built up a close relationship with the Nursing Project supervisor who arrived in January 1982. This relationship continued until the end of the project in July 1983. This was not an easy position for the project supervisor who was also assigned the task of teaching, administrative duties and tutoring while at Blue Quills.

(b) Program Advisement and Coordination

As defined previously, program advisement refers to the guidance given to students as to their course requirements; program coordination is the synchronization of the courses between institutions in order that the required courses are available to the students.

The program advisement and coordination during Phase I, which was the upgrading and service and elective portion of the program (October 1980 to January 1982), was fraught with problems.

First, students were advised incorrectly as to what courses they had required to meet the entrance requirement. Then a mathematics course was arranged which students thought they were obliged to take but found out later that there could have been other arrangements made to offer an alternative. Unfortunately, approximately eight students who had failed the course had dropped out of the Project.

Students were allowed to stay in the Project although they had not passed courses only to be told by the Project supervisor in January 1982 that they could not continue.

(c) Tutorial Services

Students depended upon their instructors for tutorial assistance. Although the Blue Quills academic services were to provide help, this did not occur. In the first course,

which had a remedial component, extra tutorial assistance would have been desirable since 33 students could not be best served by one instructor. Generally, the resource people for tutorial services were inadequate to serve the population of the Centre.

(d) Housing

Since most of the students (64 percent) were living within a 63 km radius of Blue Quills, they continued to stay at home. For the five students who relocated, three of them found accommodation in St. Paul, one lived in the Blue Quills residence and one student who was married to a person from a local reserve, lived on that reserve.

Students stated that accommodation in St. Paul was not easy to find. One Native student said that she felt that she and her children were being discriminated against. Her oldest daughter returned home to live with relatives until the student left St. Paul.

Generally speaking, housing was not a problem because the student population was drawn mostly from the local area. If the program were to expand to accept more students who would relocate, housing would be an important service to assess and plan for ahead of time.

(e) Financial Support

Funding for the project was received by Blue Quills from Health and Welfare Canada after much negotiation. The total

of $300,000 over a three year period was to cover the cost of bringing students up to the level required to enter the nursing program and to perform successfully in the nursing diploma program after entry. Blue Quills in turn signed an agreement with the educational institutions to provide their courses. It seems that the planners underestimated the cost of providing a program from upgrading to graduation with consideration for the enrichment that would be needed to support the students.

Financial assistance for accommodation, living expenses and day care services were provided to the Treaty Indian students on a regular basis by the Department of Indian Affairs through the Blue Quills office. The non-status Native and non-Native students were not so fortunate. They stated when interviewed, that they were told upon entry to the Project that everything would be paid for. The tuition and book costs were paid for but not their living allowances. Several students worked until they moved to Edmonton, but most received loans or bursaries. After moving to Edmonton, Blue Quills gave the non-status Metis and non-Native students some financial assistance until arrangements were made with Canada Employment and Immigration to pick up their expenses.

Again, the students were seemingly not well informed on entering the program as to what their financial responsibilities would be. It caused some bitter feelings especially among the non-Native students.

(f) Day Care Facilities

The day care facilities at Blue Quills proved to be a real support to most (10) of the students in the program. Without these services, there would have been few students who could have continued with their studies. Ongoing funding was not available for this purpose, but it was not for lack of trying on the part of Blue Quills personnel. Since the day care facilities did not meet provincial building and safety standards and they were on federal Crown land, the provincial government could not provide funding. Extra financial aid from Health and Welfare Canada did help to support the day care services while the Nursing Project was in place, but the need for ongoing funding still remained.

(g) Lack of Laboratory and Library Resources

The lack of laboratory and library resources was a critical deficiency in the Project. Since it was planned as a project, of which only several months of the nursing program would be spent at Blue Quills, it had been decided by planners that it did not warrant a great capital expenditure. In the final analysis, the program was not well supported in this area.

Decentralization

In order to make the nursing program more accessible to Native people, Blue Quills in conjunction with Grant MacEwan Community College and Medical Services Branch personnel

planned a nursing project which was decentralized to the Blue Quills Centre and administered by their Council. This decentralization or field centre concept allowed the Native students to carry on their studies until May 1982 in an environment which was understanding and supportive of the Indian way of life.

The fact that the nursing project was administered through a Native board attracted Native students from outside of the St. Paul area. Of the nine Native students who entered the nursing program, four (44 percent) had relocated to the area.

One of the five students who relocated to St. Paul was non-Native. One Native student, originally from Manitoba, relocated from Edmonton to St. Paul to take the program. Two students were from isolated northern communities, one from Fort Chipewyan and the other from the Lesser Slave Lake area.

Three of the four Native students who relocated had already completed their high school credits and could have sought admission to other nursing programs. When the students were interviewed they were asked why they had chosen the Blue Quills Project, one student replied "It is a program for Native students which makes it a lot easier with other students in the same boat."

The transfer of students from Blue Quills field centre to Edmonton was a situation which caused great concern. When the students were interviewed before moving to Edmonton, all

stated that they were looking forward to the transfer, mostly because of access to academic and recreational resources. They had been under the impression, however, that accommodation and day care facilities would be located for them in Edmonton, only to be informed by the project supervisor that this was not correct and that they would have to do these tasks for themselves. This turmoil occurred as they were completing their clinical practice at the St. Paul hospital and writing final examinations in anatomy and physiology. The last two weeks of April when they were to look for accommodation were less than ideal, since most accommodation is vacated at the end of the month. The project supervisor was able to help the students, but it was a situation which could have been avoided had a clear outline been given to the students at the outset of the program as to what was expected of them.

Several students were informally interviewed at Grant MacEwan Community College a month after the tranfer to Edmonton to find out how they were adjusting to their new environment. The remarks were of a positive nature. Although they found the pace faster, they felt they had more support services in Edmonton than they had had at the Blue Quills Centre. One student mentioned that the program was more organized at Grant MacEwan Community College.

The general impression of Edmonton as a place to live was that it was enjoyable with more things to do. One Native

student maintained that she liked the country but was getting used to the city.

Based on students' comments, there is no doubt that the continuity provided by having the same project supervisor after the transfer from Blue Quills to Grant MacEwan Community College was a positive factor in their successful transfer. She was able to encourage them before the move and give support where needed, such as looking for apartments, day care facilities, banks, and the day to day emotional support.

Although fourteen students were successful in transferring to Edmonton, the issue of decentralization of programs away from accredited institutions calls for more local involvement and effective program coordination throughout the process.

The Selection of Students

The high intake of 33 students was eventually reduced to 14 by the time of entry to the nursing program. However, there were a number of reasons why this happened. First, the selection criteria were not very stringent, allowing students into the program who did not have much of a chance to succeed given the pace and the lack of remedial programming tutorial services. Secondly, students were not well advised as to the courses which they would require to enter the nursing program. Lastly, in any program there are a number of students who leave for personal reasons; the program is not what they

want, family responsibilities, or other opportunities. Records as to the reason students left the program were not kept. Of the fourteen students who were accepted into the nursing program, ten (71 percent) stated that they would not have taken a nursing program if the Blue Quills project had not been offered; two (14 percent) thought there was a slight possibility that they would have; and two (14 percent) said they would eventually have gone elsewhere.

Although the project was originally planned as a Native nursing program, five (36 percent) of the students who entered Phase II, the Grant MacEwan nursing segment, were non-Native. This could happen because of the open door admission policy at Blue Quills. This was commendable from a Blue Quills point of view but it did cause some animosity amongst the students. Some of the non-Native students expressed concern that the Native students were often late or absent. One non-Native student felt that she was not really welcome at Blue Quills. This may have arisen from the understanding on entering the program that all of their finances would be looked after, only to find out that they were not.

The Implementation Time Factor

The factor which probably most affected the program was the short lead time that occurred between the approval of the funding in June 1980 until the commencement of the courses on October 6, 1980.

Administrative details were not completed between Health and Welfare Canada and Blue Quills until August 1980. This affected the recruitment and selection of students and instructors. The selection of students occurred three weeks before the courses started. Recruitment of students was limited by time. Students were taken into the project that might not have been had the selection committee been given a reasonable amount of time to plan. Candidates had little decision making and preparatory time as well.

Since the academic year had already started by the time the candidates were selected, these potential nursing students were not able to join in with other Blue Quills students in courses which were underway. The educational institution offering the Phase I courses, namely Athabasca University, had to find someone to teach a course at very short notices. Students' academic records were being reviewed while courses were underway. The students and the coordinator became caught up in the pace which never let up throughout Phase I, through the upgrading, elective and service courses. Students did not even receive a regular academic break during the summer in order to complete the first phase by January 1982. As one Blue Quills Council member stated, "We were just running like rabbits!"

In summary, the lack of adequate student support services was an issue which the Blue Quills Nursing Project attempted to address. An underestimation of the needs at the planning stage and the lack of implementation time made it

difficult to retain students and provide a program of quality.

III. Governance Issues

The extent to which there was local control in the Blue Quills Nursing Project varied in each of the areas of 1. budget; 2. personnel selection; and curriculum, which produced an organizational pattern similar to the Negotiated Services Pattern as described by McIntosh (1979:27).

The Budget

The budget which was allocated to the Blue Quills Native Education Council from the Department of Health and Welfare Canada was controlled by the Council through the Director of Finance and Administration. The educational institutions were funded for program and personnel by Blue Quills.

There were two areas where local Native boards can ensure involvement/control on the part of programs are relevant to their own people. These are the selection of personnel and the adaptation of curriculum materials (National Indian Brotherhood, 1972:18).

Personnel Selection

The Blue Quills Council's involvement in the administrative/financial aspects of the project did not extend to the academic services. These services were purchased from cooperating educational institutions who

determined the curricula and instructional personnel. The purchasing of academic services does have its drawbacks. Not only does the local council not have input to the selection process but also the institutions may not know the instructors with whom they contract for a course. This is what happened with the anatomy and physiology course. Athabasca University did not have a biology instructor so Grant MacEwan contracted a "biology" instructor. The person was not prepared to teach nursing students, the course work was covered in 12 weeks and the students did not have laboratory facilities in which to study. These factors did not help students to gain an in-depth understanding of course content which tends to be difficult for many students even when offered over a normal two-semester period.

The question also arises as to whether personnel who instruct at Blue Quills on a five to seven week basis and hired by remote educational institutions can be sensitive to the "Indian way" of life.

Most of the support service personnel were Native. This was particularly important for the day care service where Native students could leave their children and know that they would be tended to by staff who shared the same language and culture. The counselling staff were also Native and were able to provide services which were attuned to the problems facing these students, many of them returning to school after many years of absence from a formal schooling situation.

Curriculum

The amount of input that Blue Quills had into the curriculum was limited. They did manage to get two Native-oriented courses into the program after the Project was underway. The courses were in Native literature and the Cree language. The Native literature course followed the Athabasca University curriculum outlines. The Cree course was taught by a Cree instructor from Blue Quills Centre who was hired by Grant MacEwan Community College. The content of the course was similar to what was outlined for other students in the Centre with some emphasis on language that the students would be likely to encounter in their work as nurses.

It was through the educational coordinators provided first in Phase I by Athabasca University and then by Grant MacEwan in Phase II, the Blue Quills Centre personnel were able to dialogue with the educational institutions to help them understand the special needs of the students.

Organizational Patterns

The organizational patterns which emerged from the Blue Quills Project is of a Negotiated Services Pattern as described by McIntosh (1979:27). This pattern assumes equal partners--Athabasca University, Grant MacEwan Community College and the local Blue Quills Native Education Council.

1. The responsibilities of each partner were negotiated; the coordinators of the two educational institutions were

appointed--from Athabasca University during Phase I and Grant MacEwan Community College during Phase II and were accountable to their employers for the duties assigned to them;

2. Program supervision was achieved through a coordinating board made up of representatives from the Council and the particular institution involved at the time.

3. The financial arrangements are more akin to the local control pattern because funding was secured by the Blue Quills Native Education Council which in turn, purchased academic services from both Athabasca University and Grant MacEwan Community College.

In summary, the Blue Quills Native Education Council involvement in the Nursing Project was concentrated in the financial/administrative areas. Although there was an advisory component in the area of academic services, the program content remained much as it would have in any other setting. It was the field centre concept which made the Nursing Project uniquely Blue Quills. It allowed the students to remain in familiar surroundings which pursuing the initial part of the Project before transferring to Edmonton.

This chapter has presented an analysis of the program, administrative and governance issues as identified in the Blue Quills Nursing Project.

CHAPTER VII

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

1. Summary of the Study

The purpose of this study was twofold: (1) to develop an analytical framework from a review of the related literature and (2) to apply this framework to the analysis of the issues identified in the Blue Quills Nursing Diploma Pilot Project.

The study was confined to the portion of the pilot project which took place at the Blue Quills Native Education Centre ending with the transfer of the students to the city campus of Grant MacEwan Community College.

The related literature was surveyed for the issues which arise in the planning and implementation of post-secondary educational programs for firstly, minority students, then more specifically minority students in nursing, and finally Indian students. Some special organizational arrangements in Native education programs were reviewed in the literature.

The interview guide used in this study was based on issues arising from the literature. As well, the analytical framework for the study was developed from the literature.

The data were collected by individual, group and telephone interviews over a period of six weeks beginning 12 April 1982.

The data from the interviews which had been collected on audio cassettes were transcribed. The data from the

interviews as well as the data from written documents was used to describe the historical background as well as the developmental and implementation period of the Project. The implementation of the Project was analysed using a framework developed from the literature.

II. Conclusion

When considering post-secondary education for Native communities, educational administrators and nursing educators must be prepared to develop some unique arrangements to deal with special concerns. In terms of the Blue Quills Nursing Pilot Project, the following conclusions are presented.

In order to maintain program quality there is an identified need for student support services to be reflected in terms of program planning and funding. This includes the following support services: program advisement and coordination, tutorial service, financial support, housing, day care facilities and laboratory/library services.

1. Indian communities want accredited post-secondary programs for their people.
2. The lack of academic preparation for entry into nursing programs is a factor in the recruitment and retention of Native students.
3. There is a need for special organizational arrangements to make post-secondary programs more accessible to Native students, e.g., field centre concept, modified entrance requirements, and remedial programming.

4. When students are accepted on an open admission basis, consideration must be given to individualized learning.

5. The brokering of courses from other educational institutions makes it difficult, if not impossible, for a Native institution to control anything but the budget and student support services. If Native institutions want programs which are relevant to their needs, and meet academic standards, there must be a close liaison with educational institutions in the planning and development of curriculum, selection of academic personnel, as well as the administration/financial aspects.

6. Adequate student support services are critical to program quality as well as student retention.

7. Laboratory and library facilities are critical for a successful nursing program regardless of what portion of the program is decentralized.

8. Effective program coordination requires time to plan, and an academic coordinator who is able to follow the project from beginning to end. The coordinator's role becomes too heavy if given many other roles, such as instructor, program advisor, academic counsellor and personal counsellor.

9. Students require written information concerning the details of the program.

III. Recommendations for Nursing Education for Native Communities

Based on the literature and in light of the study

results the following recommendations are made for future nursing education programs for Native communities:

1. Adequate funding should be sought and made available to provide complete student support services if program quality is to be maintained in field centres.
2. Funds and time are required for Native communities to plan the implementation and coordination process with the academic institutions especially when the courses are brokered.
3. An academic project supervisor selected in cooperation by the Native and academic institutions, should be assigned as early as the upgrading portion of the program to ensure program coordination and to assess the readiness of students to enter the nursing program.
4. All instructors, including clinical instructors in the hospital setting, should have some exposure to the Native institution and to the students before the courses and clinical practicum begin.
5. Each program should be planned with a Native cultural component. The extent to which this occurs will depend on the local Native institution decision makers in cooperation with the academic institutions.
6. Potential students need to be informed in writing of the details of the program, i.e., courses, financial aid, holiday time, day care facilities, etc.

IV. Recommendations for Future Research

1. The study represents a description of a unique organizational arrangement to educate Native nursing students at Blue Quills Native Education Centre. A further study should be undertaken to follow the progress of the fourteen students in the urban campus setting of Grant MacEwan Community College after their transfer from Blue Quills.

2. Little research has been reported in the literature concerning Native students in nursing education. This body of knowledge needs to be expanded to determine why Native students are under-represented in nursing education.

EPILOGUE

In July of 1983, nine of the fourteen (64%) nursing students who completed Phase II at the Blue Quills Centre graduated from the Nursing Diploma Program at the Grant MacEwan Community College in Edmonton. Of these nine students, four (44%) were Native. Five of the nine students (56%), two (22%) of whom were Native nursing students, passed the comprehensive nursing examination which qualified them as Registered Nurses in the Province of Alberta. Since the writing of the first examination in August 1983, one more non-Native nurse has been successful in obtaining registration by rewriting the examination. Three more Native nurses are scheduled to rewrite.

One more nurse has completed the Program at Grant MacEwan bringing the total to ten graduates, of which six are registered. One Native student has only two courses left in order to complete the program but is presently not pursuing that goal.

Two of the Native nurses worked at the Whitehorse General Hospital for a year upon graduation. One of these nurses transferred to a health centre in Southern Alberta in the summer of 1984. The other has remained at the Whitehorse Hospital. Several graduates have been employed at St. Paul and Bonnyville hospitals and one nurse from the Slave Lake area returned to her home area where she has been employed.

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APPENDIX A

INTERVIEW GUIDE

Students

Demographic Date:

Age _____

Sex _____

Indian Status Treaty _____ Non-Treaty _____

Metis _____ Other _____

Distance from home base _____mi.

Marital Status Single _____ Married _____

Separated _____ Divorced _____

Widowed _____

Number of dependants Spouse _____

Children: 0 - 5 _____

5 -15 _____

16-over _____

Other _____

Academic Background

Last grade completed in high school _____

Year last grade completed _____

Post-secondary education - # years

diploma/degree

University _____

College _____

Technical/Vocational School

Other _____

Previous Work Experience

full time _____ part time _____ volunteer _____

Occupational category - clerical _____

management _____ health field _____

other, specify _____

Reasons for Choosing Nursing

_____

_____

_____

Blue Quills Program

Why Blue Quills School? _____

Started _____

Upgrading _____

Classes to develop skills in: reading _____

mathematics _____

study skills _____

library use _____

Other support services: day care _____

personal counselling _____

transportation _____

financial assistance _____

housing _____

Comments On

Curriculum _____

Program delivery _____

Field centre or off-campus concept _____

Transfer to Edmonton _____

Clinical experience _____

INTERVIEW GUIDE

Director of Nursing Educaton & Coordinator

Involvement in: curriculum for program (Who made decisions re curriculum?) _____

student selection _____

ensuring program quality through remedial program _____

tutoring program _____

counselling _____

personnel selection: instructors _____ coordinator ____

Comments on: off-campus setting _____

transfer of students to urban setting _____

clinical experience at local hospitals _____

funding _____

Strengths and weaknesses of program _____

INTERVIEW GUIDE

Council Members

Involvement in: recruitment and selection criteria _____

curriculum modification _____

providing support services _____

personnel selection _____

securing funding _____

budgeting _____

Comments on: off-campus concept _____

transfer of students to urban setting _____

Strengths and weaknesses of program _____

INTERVIEW GUIDE

Instructors

How did you first become involved in the Blue Quills nursing program?

What is your involvement in the program?

Is remedial work or tutoring part of your role?

Do students depend on you for any other support service; such as personal conselling or career counselling?

How is the curriculum content of the courses you teach decided upon?

What effect has the off-campus aspect of the program had?

What are the strengths of the program?

What are the weaknesses of the program?

HISTORICAL BACKGROUND

What sparked the idea of having a nursing education program at Blue Quills?

When did this happen?

Who were the key people involved?

What were the main events that occurred from the point where it was only an idea to the time when it was an actual program?

What kind of support for this program did you receive from the communities served by Blue Quills?

APPENDIX B

APPENDIX B

Members of the Blue Quills Native
Education Council
Box 279
St. Paul, Alberta T0A 3A0
April, 1982

Dear Members:

The assistance of the council is requested in a research study which I am conducting as a graduate student at the University of Alberta in the Department of Educational Administration. The study is being done under the advisement of Dr. Gordon McIntosh.

The purpose fo the study is to document the historical background of the nursing program at Blue Quills, as well as to explore the issues which make the program unique.

The issues which are in the areas of education, administration and decision-making can best be explored by interviewing the people involved in the program, as well as obtaining information from available records, documents, and correspondence. It will be necessary to interview members of the council, administrators, coordinators, instructors and students. Interviews would range from approximately 45 minutes to an hour. Except for the information on the historial background of the program, responses will be kept confidential.

Your permission to use a tape recorder would be appreciated. As well, any records, curricula, or documents concerning the program which I might have access to would be valuable in describing the program.

I look forward to your anticipated cooperation.

Yours sincerely,

Marjory Davison, R.N., BScN.
Graduate Student
Department of Educational Administration
University of Alberta
Edmonton, Alberta

APPENDIX C

APPENDIX C

OBJECTIVES AND ACTIVITIES OF THIS CONTRIBUTION AGREEMENT

The Blue Quills Native Education Council (Blue Quills) located at St. Paul, Alberta will administer the Blue Quills Nursing Program which will provide a Basic Nursing Diploma (leading to R.N.) Program for a maximum of 20 students.

The Blue Quills Native Education Council will enter into an agreement with the Health Sciences Department of Grant MacEwan Community College in Edmonton, Alberta to provide a Basic Nursing Diploma Program to Blue Quills students that is equivalent in all ways to the academic education received by students being offered the Basic Nursing Diploma Program at the Grant MacEwan Campus. The Program will be provided jointly at Blue Quills in St. Paul, Alberta and Grant MacEwan in Edmonton, Alberta. A copy of the Grant MacEwan Basic Nursing Diploma curriculum is attached as Appendix "D" of this agreement.

Graduates of this program would be eligible to apply for licensure as registered nurses in Alberta and could undertake the Canadian Registered Nurses examination if the graduate wished to practice elsewhere.

The Blue Quills Nursing Program will be divided into two (2) phases:

- Phase I (October 1, 1980 to December 31, 1981) will be composed of a mixture of courses, mostly non-nursing academic elective and required courses with a few fundamental nursing courses included. In addition, some high school or university level courses could be provided. These courses, to be given at the Blue Quills facilities, are designed to provide the Program students with the basic education qualifications required for admission to the regular Basic Nursing Program at Grant MacEwan in accordance with the regulations governing schools of nursing in Alberta. A copy of the curriculum for these courses is attached as Appendix "E" of this agreement.

- Phase II (January 1, 1982 to July 31, 1983) will see those students who qualify for admission, relocating to Edmonton where they will continue to work toward their nursing diploma at Grant MacEwan and larger health facilities.

A copy of the Implementation Schedule for the Project is attached as Appendix "F" of this agreement.

BLUE QUILLS RESPONSIBILITIES

PART I

To pay an agreed upon amount of monies to Grant MacEwan for providing a Basic Nursing Diploma (R.N.) Program at Blue Quills in St. Paul and Edmonton that is equivalent in all ways to the academic education received by students being offered the Basic Nursing Diploma program at the Grant MacEwan Campus.

1. To pay an agreed upon amount of monies to Grant MacEwan for providing Qualified Instructors for the applied Nursing Courses.

2. To pay an agreed upon amount of monies to Grant MacEwan where required for:

   -Laboratory equipment and space
   -Books, supplies and exams for courses offered by Grant MacEwan

3. To provide Classroom space for Grant MacEwan Instructors and courses of Blue Quills.

4. To provide laboratory classroom space and equipment where available at Blue Quills.

5. Blue Quills agrees to provide required non-nursing courses and instructors through existing Blue Quills University degree programs. Blue Quills and Grant MacEwan would jointly work with the Universities involved to ensure that courses meeting the needs of nursing students are provided.

6. To provided Tutorial assistance and Counselling Services to nursing students at Blue Quills.

7. To provide courses and instructors that are required for admission to Grant MacEwan Nursing Program that Native applicants may be deficient in.

8. To hire and pay an annual salary and travel expenses to a Project Supervisor for the Nursing Diploma Program for the duration of the project. Said Project Supervisor to be approved jointly by Grant MacEwan and Blue Quills before being hired by Blue Quills.

9. To provide accommodation and meals in the Blue Quills Instructors' Residence, when available, for visiting Grant MacEwan Instructors. When there is no Instructor Residence available, visiting instructors will be lodged in a St. Paul Motel close by Blue Quills School and meals will be provided at the Blue Quills facilities.

10. To provide students for the Nursing Program that meet the requirements for admission to the Grant MacEwan Program.

11. To participate in formative and summative evaluation of the project.

12. To provide any other service or requirement not heretofore mentioned that may be deemed necessary and jointly agreed upon by Blue Quills and Grant MacEwan.

PART II

To ensure by agreement or otherwise that Grant MacEwan will:

1. Provide a Basic Nursing Diploma (R.N.) Program to a maximum of 20 Blue Quills students that is equivalent in all ways to the academic education received by students being offered the Basic Nursing Diploma Program at the Grant MacEwan Campus;

2. Provide qualified instructors for the Nursing, Anatomy and Physiology courses;

3. Provide laboratory and clinical practice and experience that is not available at Blue Quills or surrounding districts in Edmonton through Grant MacEwan;

4. Make available Books, Supplies and Exams in all courses provided and instructed by Grant MacEwan staff;

5. Provide access to Grant MacEwan Library for Books and Materials to Blue Quills students;

6. Facilitate liaison between the Project Supervisor of Blue Quills Nursing Program and Grant MacEwan Health Sciences Department;

7. Provide tutorial assistance and counselling services to nursing students at Grant MacEwan;

8. Provide for formative and summative evaluation of the project; and

9. Provide any other service or requirement not heretofore mentioned that may be deemed necessary and jointly agreed upon by Blue Quills and Grant MacEwan.

APPENDIX D

APPENDIX D

Members of the Blue Quills Native Education Council at the time of the signing of the contribution agreement for the nursing project on September 9, 1980 were:

Position	Name	Reserve
Chairman	*Alex Redcrow	Saddle Lake
Vice Chairman	Roland Dion	Kehewin
Treasurer	*Edith Memnook	Goodfish Lake
Secretary	*Alice Makokis	Saddle Lake
Representatives	1 Sam Bull	Goodfish Lake
	*2 Solomon Delver	Frog Lake
	*3 Theresa Gadwa	Kehewin
	*4 Lillian Prudine	Beaver Lake
	5 John Janvier	Cold Lake
	6 Vacant	Heart Lake
	*7 Charles Wood	Saddle Lake

*Members of the Council whose names appear on the signed agreement for the nursing program.

APPENDIX E

Nursing

Basic Nursing Diploma

Mill Woods Campus

The Registrar
Grant MacEwan Community College
Box 1796, Edmonton, Alberta T5J 2P2
(403) 429 2503

Today's nurse works in cooperation with other members of the health care team — physicians, physiotherapists, pharmacists and social workers — to assist people in meeting their health needs. Demands upon nursing professionals range from providing information on health concerns to promoting proper health care and preventing disease, as well as providing restorative care and emotional support. Although it is a high stress profession, both men and women find meeting the challenges of general nursing a deeply satisfying career experience.

The College offers a total of five nursing programs.

The Basic Nursing Diploma requires two years and the Supplementary Nursing Diploma for registered psychiatric nurses one year.

Post basic certificate programs for registered nurses in extended care nursing and occupational health nursing are one year in length. The nursing refresher course is an intensive eight week program.

Basic Nursing Diploma

Career Potential

Graduates of this program are eligible to apply for licensure as registered nurses in Alberta. Upon successful completion of the program and the Canadian Registered Nurses examination, employment opportunities may be found in hospitals and other health agencies. Positions for new graduate nurses are available in areas such as medicine, surgery, pediatrics, obstetrics, psychiatry and in extended care units.

After gaining some experience, graduates may elect to undertake one of many post basic programs available in Canada or internationally to further their knowledge and skills in specialty areas of nursing. Most universities in the major cities also offer bachelor of nursing programs for graduates from diploma programs.

The Program

The program consists of four trimesters of 15 weeks duration and two spring sessions of six and nine weeks respectively. Concurrent with nursing classes, experience is planned for the students in community health agencies within and outside the city of Edmonton. Classes in general education and electives are also part of the curriculum. The plan of the program includes the courses listed. Effective July 1, 1980, students registered in the Basic Nursing Diploma program are assessed a fee of $5.00 for liability insurance to cover students during their field placements.

Admission Requirements

Regular Admission

Applicants must possess an Alberta high school diploma or equivalent with a mark of 50 per cent or better in English 30, Biology 30 and two other 30 level matriculation subjects. An overall average of 60 per cent or better in four subjects is required. Information sessions regarding the program are organized through the Registrar's Office.

Mature Admission

Applicants must be 25 years of age or over and present a mark of 50 per cent or better in three Alberta grade twelve 30 level matriculation subjects, including English and biology. An overall average of 60 per cent or better in the three subjects is required. In all cases an interview and testing are required as a basis for individual assessment prior to acceptance into the program.

The following applies to all applicants for the nursing program. Developmental work identified through the student study skills appraisal must be completed prior to commencing the program. A current Standard First Aid Certificate is required before beginning the program. This may be provided by St. John's Ambulance (429 6287). A copy of the certificate must be forwarded to the Registrar. A pre entrance health examination and current immunization are required. Appropriate forms will be supplied to each candidate, upon provisional acceptance.

Program of Studies

Trimester I			Hrs. of Inst.
NE	101.3	Nursing Fundamentals	(3 0 0)
NE	102.3	Human Relations	(3 0 0)
NE	103.5	Clinical Practice I	(2 6 0)
BI	102.3	Anatomy and Physiology	(2 2 0)
EN	100.3	Communications	(3 0 0)
PY	101.3	Introductory Psychology	(3 0 0)
Trimester II			
BI	202.3	Anatomy and Physiology	(2 2 0)
PY	102.3	Developmental Psychology	(3 0 0)
SO	101.3	Introductory Sociology and	(3 0 0)
NE	204.3	Nursing — The Family	(3 0 0)
NE	205.6	Clinical Practice II	(2 5 0)
		or	
NE	306.3	Nursing — Mental Health Problems	(3 0 0)
NE	307.6	Clinical Practice III	(2 6 0)

Spring Session I (6 weeks)

NE 204.3	Nursing — The Family	(3:0:0)
NE 205.6	Clinical Practice II	(2:8:0)
NE 306.3	Nursing — Mental Health Problems	(3:0:0)
NE 307.6	Clinical Practice III	(2:8:0)

Trimester III

NE 401.3	Health Sciences Ethics	(3:0:0)
NE 408.4	Nursing — Health Problems I	(4:0:0)
NE 409.7	Clinical Practice IV	(2:10:0)
.3	Behavioral Sciences Elective	
.3	Language or Approved Arts Elective	

Trimester IV

NE 510.4	Nursing — Health Problems II	(4:0:0)
NE 511.7	Clinical Practice V	(2:10:0)
.3	English Elective	
.3	Elective	

Spring Session II (9 weeks)

NE 612.6	Nursing (A Career) (4 weeks)	(2:8:0)
NE 613.4	Clinical Practice VI (5 weeks)	(1:0:12)

Course Descriptions

BI 102.3
Human Anatomy and Physiology (2:2:0)

An introductory course in human anatomy and physiology, designed for students with high school biology. Students will spend two hours a week in a laboratory where they will be involved in a study of the subject area using various laboratory techniques and procedures.

BI 202.3
Human Anatomy and Physiology (2:2:0)

This is a continuation of BI 102.3 and is designed particularly for students with an adequate biology background. Students will spend two hours a week in a laboratory where they will be involved in a study of the subject area using various laboratory techniques and procedures.

EN 100.3
Communications (3:0:0)

This course is aimed at acquainting students with the various forms of communication. The primary focus will be on helping students strengthen their basic writing skills. In addition, it will involve them in studying the influence of the various media and the ways verbal and nonverbal language affect everyday life.

NE 101.3
Nursing Fundamentals (3:0:0)

A foundations course describing the role of the diploma nurse. Methods of identifying individual patient needs and providing for the gratification of such needs will be discussed.

NE 102.3
Human Relations (3:0:0)

This course provides a learning experience which relates to development of self awareness and interpersonal skills. Opportunities will be provided for the acquisition of skills in one to one communication and in working together as a group.

NE 103.5
Clinical Practice (2:6:0)

The development of basic technical and interpersonal skills related to the content of NE 101.3 learning experiences will be gained in the classroom, nursing laboratory, library, nursing homes and acute care settings.

NE 204.3
Nursing — The Family (3:0:0)

This course deals with maternal and child health care. The focus will be on the role of the diploma nurse with regard to: women in hospital prior to, during and following delivery, normal newborns in the hospital setting, health supervision and anticipatory guidance needed during the maternity cycle and from birth to adolescence, common complications that occur during the maternity cycle, deviations from the normal that may occur in the newborn, community resources available to families. Prerequisites: NE 101.3, NE 103.5, NE 102.3, BI 102.3.

NE 205.6
Clinical Practice II (2:8:0)

This course deals with nursing practice in the area of maternal and child care and is related to the content of NE 204.3. Students will care for mothers and their newborn babies in the hospital setting. They will also be introduced to health related community resources available to families in Edmonton. Prerequisites: NE 101.3, NE 103.5, NE 102.3, BI 102.3.

NE 306.3
Nursing — Mental Health Problems (3:0:0)

A discussion of the psychosocial and economic implications of mental health problems as they affect the patient, family and community. Ways in which the helping relationship can serve as a positive intervention in the experience of mental illness will be explored, with particular emphasis on the role of the nurse. Prerequisite: NE 102.3, NE 101.3, NE 103.5, PY 101.3.

NE 307.6
Clinical Practice III (2:8:0)

Learning experiences related to the content of NE 306.3. Opportunities to work with patients experiencing mental health problems will be provided. Community agencies, general and psychiatric hospital units will be utilized for this purpose. Prerequisite: NE 101.3, NE 102.3, NE 103.5, PY 101.3.

NE 401.3
Health Sciences Ethics (3:0:0)

A study of prominent value systems in contemporary society and the basis upon which such systems are founded. An initiation into elementary judgmental skills for the critical examination, understanding and adoption of a selected value system, especially in relation to health and human life. Prerequisite: SO 101.3.

NE 408.4
Nursing — Health Problems I (4:0:0)

A discussion of the patient's needs as may be altered by illness and treatment. An appreciation of the psychosocial and economic implications of illness for the patient, family and community. Prerequisites: NE 204.3, NE 205.6, NE 306.3, NE 307.6, BI 202.3, PY 102.3, SO 101.3.

NE 409.7
Clinical Practice IV (2:10:0)

Supervised observations and nursing experience in the community and hospital, arranged concurrently with NE 408.4. Experience will be provided in nursing patients of all ages who have common health problems. Prerequisites: NE 204.3, NE 205.6, NE 306.3, NE 307.6, BI 202.3, PY 102.3, SO 101.3.

NE 510.4
Nursing — Health Problems II (4:0:0)

A continuation of NE 408.4 in which further discussion will take place concerning patient needs as may be altered by illness and treatment. Prerequisites: NE 408.4, NE 409.7.

NE 511.7
Clinical Practice V (2:10:0)

Supervised observation and nursing experience in the community and hospital arranged concurrently with NE 510.4. Experience will be provided in nursing patients of all ages who have multiple health problems. Prerequisites: NE 408.4 and NE 409.7.

NE 612.6
Nursing (A Career) (2:8:0)

A review of issues concerning the diploma nurse graduate with combined guided nursing experience on all tours of duty in a hospital over a four week period. Integrated seminars include graduate nurse responsibilities as a health team member, leader and a member of a professional association. Prerequisites NE 510.4, NE 511.7.

NE 613.4
Clinical Practice VI (1:0:12)

A variety of acute care hospitals in rural and urban settings will be used to offer nursing experience, on all tours of duty over a five week period. The aim is to prepare the nursing students for the working situation as it exists for the diploma nurse. Discussions during integration seminar include trends in nursing education, graduate nurse responsibilities and occupational opportunities in nursing and the rights of the patient, employer and nurse. Prerequisite NE 612.6.

PY 101.3
Introductory Psychology (3:0:0)

An introduction to the study of human behavior. This course is a survey course of major topics in psychology including development, learning, motivation, perception, personality and abnormality.

PY 102.3
Developmental Psychology (3:0:0)

The study of behavior as it is related to normal development and aging; maturational, learning and particularly social influences on individual development will be considered. Prerequisite PY 101.3.

SO 101.3
Introductory Sociology (3:0:0)

An analysis of the nature of society, the interrelationships of its component groups, and the process of persistence and change. The emphasis is on man as a social being and the social forces and the institutions which shape him, such as socialization, conformist and nonconformist behavior, the family, social class and ethnic group relations.

Faculty and Staff

Judith Prowse	*Chairman*
Irene Belland	*Instructional Assistant*

Basic Nursing Program

Julie Lazaruk	*Head — First Year*
Connie Eligh	*Head — Second Year*

Basic Nursing and Supplementary Nursing Programs

Danin Bodnar	*Instructor F/T*
Therese Bonneau	*Instructor F/T*
Cheryl Hoffmeyer	*Instructor F/T*
Claire Kibbler	*Instructor F/T*
Myrna Maquera	*Instructor F/T*
Marie Middleton	*Instructor F/T*
Barry Olsen	*Instructor F/T*
Carmen Pana	*Instructor F/T*
Bernice Stiansen	*Instructor F/T*
Isabelle Darrah	*Instructor P/T*
Wynne Edwards	*Instructor P/T*
Georgina Fysh	*Instructor P/T*
Sheila Gravelle	*Instructor P/T*
Marilyn MacDonald	*Instructor P/T*
Marilyn Meyer	*Instructor P/T*
Shirley Reid	*Instructor P/T*
Pat Roddick	*Instructor P/T*
Camille Romaniuk	*Instructor P/T*
Deborah Ullan	*Instructor P/T*
Sandra Whytock	*Instructor P/T*
Jennie Wilting	*Instructor P/T*

Basic Nursing and Supplementary Nursing Programs Advisory Committee

Bonnie Caza
Program Graduate
Staff Nurse
Glenrose Provincial General Hospital

L.L. Lewchuk
Director
School of Nursing
University of Alberta Hospital

D.A. MacGregor
Assistant Executive Director
Misericordia Hospital

Nicole Prefontaine
Director
Nursing Service
Edmonton General Hospital

H.J. Stockburger
Surgeon
Edmonton

W.M. Ferguson
Chairperson
Fort Saskatchewan

Phyllis Lychak
Representative
Alberta Hospital Association

APPENDIX F

IMPLEMENTATION SCHEDULE FOR PHASE I

NON-NURSING COURSES

1980			1981											
O	N	D	J	F	M	A	M	J	J	A	S	O	N	D

English 255	Math 30	Biology 100	Psych 237	Sociology 238	Psych 228	Cree	Behav. Science	English 300	Elective Option	First Aid/ CPR 1 week

7 weeks per course — 5 weeks per course — Health Assessments Immunization Tests

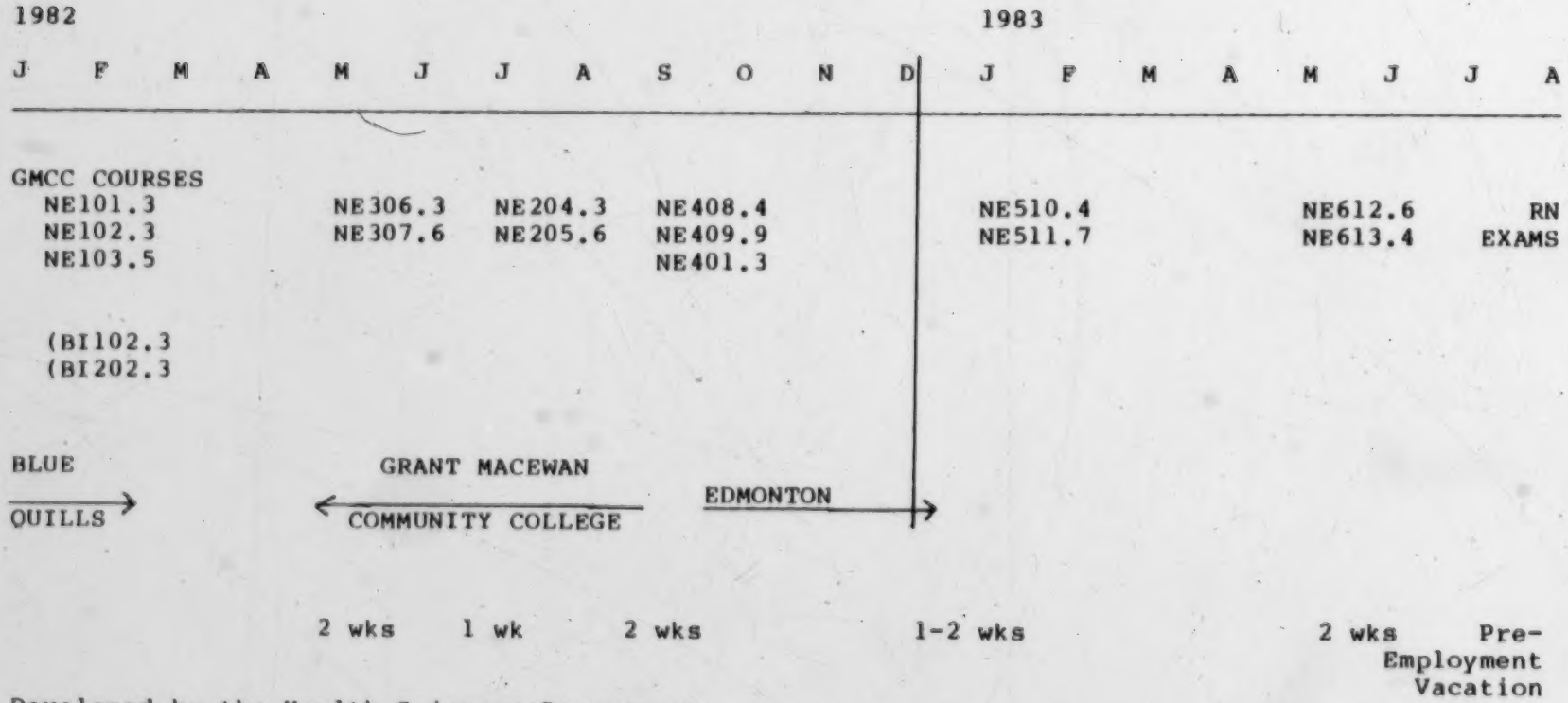
Blue Quills

Xmas Break (2 weeks)	Break (1 week)	Break (2 weeks)	Break (1 week)	Xmas Break (1-2 weeks)

Developed by the Health Sciences Department
Grant MacEwan Community College

IMPLEMENTATION SCHEDULE OF PHASE II

NURSING COURSES



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